

CALIFORNIA – CHILD AND FAMILY SERVICES REVIEW

System Improvement Plan

2022-2027



LIVEWELLSD.ORG



LIVE WELL
SAN DIEGO



CDSS
CALIFORNIA
DEPARTMENT OF
SOCIAL SERVICES

Table of Contents

C-CFSR Signature Page.....3

Introduction.....5

SIP Narrative7

Child Welfare/Probation Placement Initiatives22

Five-Year SIP Chart.....33

CAPIT/CBCAP/PSSF Expenditure Workbook.....46

CAPIT/CBCAP/PSSF Program and Evaluation Description.....47

Appendices.....58

Board of Supervisors Minute Order/Resolution.....Attachment xx

California – Child and Family Services Review Signature Sheet


For submittal of: CSA ☐ SIP ☒ Progress Report ☐


County	San Diego
SIP Period Dates	2022-2027
Outcome Data Period	Quarter 2

County Child Welfare Agency Director	
Name	Kimberly Giardina, DSW, Director
Signature*	Giardina, Kimberly <small>Digitally signed by Giardina, Kimberly Date: 2023.04.06 15:36:10 -07'00'</small>
Phone Number	(858) 616-5815
Mailing Address	8965 Balboa Avenue, San Diego, CA 92123

County Chief Probation Officer	
Name	Tamika Nelson
Signature*	Tamika Nelson <small>Digitally signed by Tamika Nelson Date: 2023.04.06 12:50:09 -07'00'</small>
Phone Number	(858) 514-3200
Mailing Address	9444 Balboa Avenue, Suite 500, San Diego CA 92123

Public Agency Designated to Administer CAPTI and CBCAP	
Name	Alex Kahn
Signature*	Alex Kahn <small>Digitally signed by Alex Kahn Date: 2023.04.06 17:15:23 -07'00'</small>
Phone Number	(858) 614-9135
Mailing Address	8965 Balboa Ave, San Diego CA 92123

Board of Supervisors (BOS) Signature	
BOS Approval Date	
Name	Andrew Potter
Signature*	

Approved and/or authorized by the Board of Supervisors of the County of San Diego.	
Meeting Date: 5/2/23	Minute Order No. 6
By: 	Date: 6/5/23
Deputy Clerk of the Board Supervisors	

APPROVED AS TO FORM AND LEGAL
COUNTY COUNSEL

Mail the original Signature Sheet to:

*Signatures must be in blue ink

Children and Family Services Division
Outcomes and Accountability Section
California Department of Social Services
744 P Street, MS 8-12-91
Sacramento, CA 95814

SENIOR DEPUTY COUNTY COUNSEL

Contact Information		
Child Welfare Agency	Name	Laura Krzywicki
	Agency	Child Welfare Services
	Phone & Email	(858) 616-5989 Laura.Krzywicki@sdcounty.ca.gov
	Mailing Address	8965 Balboa Avenue, San Diego, CA 92123
Probation Agency	Name	Tabatha Wilburn
	Agency	San Diego County Probation
	Phone & Email	(858) 514-3181 Tabatha.Wilburn@sdcounty.ca.gov
	Mailing Address	9444 Balboa Avenue, Suite 500, San Diego CA 92123
Public Agency Administering CAPIT and CBCAP	Name	Alex Kahn
	Agency	Child Welfare Services
	Phone & Email	(858) 614-9135 Alex.Kahn@sdcounty.ca.gov
	Mailing Address	8965 Balboa Avenue, San Diego, CA 92123
CAPIT Liaison	Name	Alex Kahn
	Agency	Child Welfare Services
	Phone & Email	(858) 614-9135 Alex.Kahn@sdcounty.ca.gov
	Mailing Address	8965 Balboa Avenue, San Diego, CA 92123
CBCAP Liaison	Name	Alex Kahn
	Agency	Child Welfare Services
	Phone & Email	(858) 614-9135 Alex.Kahn@sdcounty.ca.gov
	Mailing Address	8965 Balboa Avenue, San Diego, CA 92123
PSSF Liaison	Name	Alex Kahn
	Agency	Child Welfare Services
	Phone & Email	(858) 614-9135 Alex.Kahn@sdcounty.ca.gov
	Mailing Address	8965 Balboa Avenue, San Diego, CA 92123

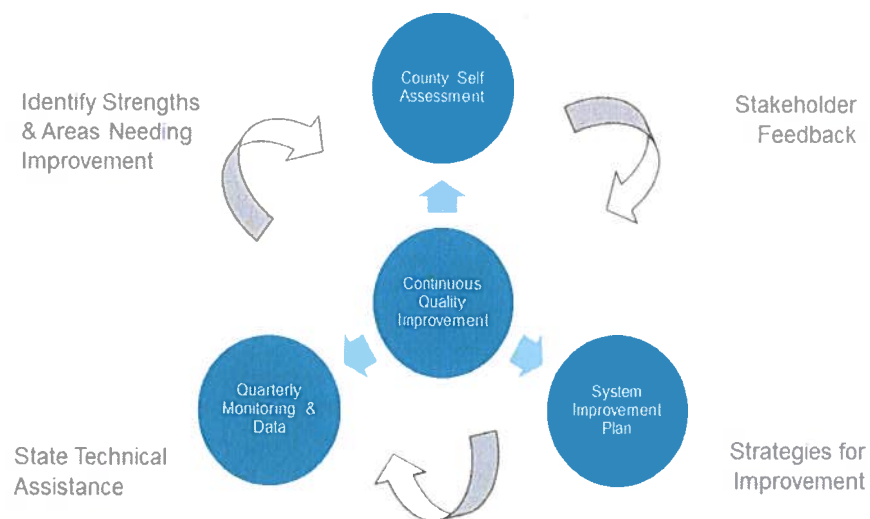
2. Introduction

In 2001, California Assembly Bill 636 established the Child Welfare Outcomes and Accountability System. AB 636 was designed to meet two wide-ranging objectives:

- A. To improve Child Welfare Services for children and their families in California and
- B. Provide a system of accountability at state and county level for outcome performance

The California-Children and Family Services Review (C-CFSR) is the mechanism used by the State and counties to achieve AB 636 objectives. As Exhibit 1 depicts, the C-CFSR is a process which begins with the County Self-Assessment (CSA) and Peer Review whereby counties use multiple methods, data sources, and community engagement strategies to examine and analyze their strengths and needs from prevention through the continuum of care, including reviews of procedural and systemic practices, current levels of performance, and available resources. What is gleaned from the CSA and Peer Review informs the development of the System Improvement Plan (SIP) which serves as the roadmap of measurable goals and strategies to be implemented in the next five years to improve safety, permanency, and well-being of children. County Child Welfare and Probation agencies are the lead agencies responsible for ongoing evaluation and revision of those solutions for continuous improvement. To meet the changing needs of the system activities are monitored over time and may be updated through the Annual System Improvement Plan Progress Report (ASIPPR).

Exhibit 1. C-CFSR Process



As is depicted in Exhibit 2, San Diego County launched into the County Self-Assessment (CSA) process in September 2021. The County used multiple methods, data sources, and community engagement strategies to examine and analyze its strengths and needs across the continuum of care, including reviews of procedural and systemic practices, current levels of performance, and available resources. The San Diego County SIP is built upon the data and lessons learned from both the CSA and the Peer Review conducted in April 2022. Development of the SIP was guided by an implementation team, comprised of staff from Child Welfare Services (CWS) and Probation with facilitation support from Harder+Company Community Research. The SIP Planning Team (SIP Team) met routinely throughout the C-CFSR process to design an approach that was inclusive of the larger community, including those with lived experience and tribal partners, informed by County data and trends, and guided by best and promising practices in the field. The information gleaned from the CSA and Peer Review was synthesized and shared with stakeholders during various engagement sessions to inform the development of the SIP goals, objectives and strategies. Specifically, the SIP Team presented at five pre-existing County meetings from October 13-27, 2022. These included the Foster Care Services Committee meeting; 7th Generation; Partners in Prevention; and both Child & Family Strengthening Advisory Board Subcommittees- the Foster Alumni & Youth Community Empowerment Subcommittee (FAYCES) and Child & Family Services Subcommittee. The SIP Team conducted targeted outreach to invite individuals who participated in the CSA focus groups (foster youth, Tribal partners, resource parents, and parents or guardians of youth involved with CWS and Probation). After initial meetings, the SIP Team re-engaged some of the community facilitators to present back their learnings and reflections from focus groups. For those individuals who could not attend these meetings and to reach a broader community stakeholder group, Harder+Company developed both a six page and one page CSA Community Report. These reports highlighted a quick breakdown of the key findings from the CSA. In addition to the above, CWS presented to the Child Welfare Lived Experience Committee on October 11, 2022 to obtain their feedback. This committee is comprised of staff with lived experience as a former foster youth or adoptee. The committee participates in special projects, and reviewing policies to ensure they include the voice of the child and family.

Altogether, these meetings provided another opportunity to hear any additional reflections or input on the direction of the proposed SIP strategies for the next 5 years. Asynchronously, the SIP Team shared a Google Doc link for meeting attendees to provide reflections on the strategies selected. Harder+Company synthesized information into strategy specific considerations. This data is presented in Community Reflection boxes under the Strategies section for CWS and Probation. The information from the community is thoughtful, valuable and was taken into consideration when developing the strategies and action steps in the SIP. Although not every recommendation is integrated to an action step in this SIP, the feedback has been taken into consideration for other CWS/Probation initiatives and projects. Please see Appendix A for the formal recommendations submitted by FAYCES.

Exhibit 2. San Diego County CSA/SIP Engagement Process and Timeline



3. SIP Narrative

A. C-CFSR Team and Core Representatives

The County of San Diego SIP Planning Team composition was based on the *C-CFSR Instruction Manual* list of required core and consulted member representatives. Required stakeholders included Child Welfare Services, Juvenile Probation, Native American Tribes, service recipients including foster youth, parents and resource families, and county agency partners. As stated above, in order to gather input on strategies, the SIP planning team presented the results of the CSA and key themes identified by stakeholders, as well as the strategies developed based on these themes. Stakeholders were given the opportunity to provide their reflections related to the strategies presented at meetings, as well as in a Google Doc in order to gather the feedback. Exhibit 3 details the core SIP Planning team, from which emerged the process for stakeholder participation in the development and prioritization of SIP strategies.

Exhibit 3. SIP Planning Team	
Representatives by Affiliation Organization	Name
County of San Diego Child Welfare Services	Nicole Kelsay Stephanie Gross Peggy Ceballos-Lopez Delona King
County of San Diego Probation Department	Yovana Cortez Pablo Carrillo Frank Andrade
California Department of Social Services	Victoria Bueno Taylor Anderson Ashlyn Dadkhah
Harder+Company Community Research	Mildred Ferrer Jennifer James Casey Mackereth

B. Prioritization of Outcome Data Measures/Systemic Factors and Strategy Rationale

Child Welfare Services

Summary of CWS Outcome Measures Performing Below National Standard

CWS used 2021 Quarter 2 data in determining what CFSR measures were above and below the national standard.

Maltreatment in Foster Care (Measure S1)

This measure describes the rate of victimization per day of foster care for all children in foster care during a 12-month period. The Round 3 C-CFSR National Standard was 8.5. Round 4 C-CFSR National Standard will be a rate of 9.07. The trend of maltreatment rate in foster care for San Diego decreased

from 2012 to 2017, but then generally increased to the present date. As of 2021 Quarter 2, it is above the national standard at a rate of 10.05.

Recurrence of Maltreatment (Measure S2)

This measure tracks the percentage of children who were victims of another substantiated maltreatment allegation within 12 months of their initial report. The trend for San Diego is roughly similar to measure S1 above, tracking downward through 2018 and then increasing to the present day to be just above the national standard of 9.1. The 2021 Quarter 2 data for San Diego CWS is 9.2 percent. For Round 4 of the C-CFSR the National Standard will be 9.7 percent. This measure will continue to be monitored.

Permanency in 12 months for children entering foster care (Measure P1)

This measure tracks the percent of children discharged to permanency (reunification, adoption, or guardianship) within 12 months of entering foster care. It is important to note that the National Standard for P1 during Round 3 of the C-CFSR was 40.5%, however, for Round 4 of the C-CFSR the National Standard will be 35.2%. As of 2021 Quarter 2, CWS is at 31.1% and the SIP goal will be to achieve the National Standard. Continued work on strategies implemented in the last SIP as well as new ideas received through the CSA activities will position San Diego well in achieving this goal. San Diego is achieving above the National Standard for Permanency in 12 months for children in care 12-23 months (P2), and Permanency in 12 months for children in care 24 months or more (P3). The National Standard for P2 during Round 3 was 43.6%, and for Round 4 it will be 43.8%. San Diego's P2 performance is at 52.1%. The National Standard for P3 during Round 3 was 30.3%, and for Round 4 it will be 37.3%. San Diego's P3 performance is at 39.3%.

Re-entry to foster care in 12 months (Measure P4)

This measure includes the percentage of children reunified within 12 months, but who re-entered foster within 12 months of their discharge from foster care. Round 3 C-CFSR National Standard was 8.3%. San Diego's current performance is 9.2%, below California at 10.3%. Round 4 C-CFSR National Standard will be 5.6% using a different methodology.

Placement stability (Measure P5)

The measure tracks the placement moves per day of foster care for all children who entered foster care in a 12-month period. The National Standard is 4.12 moves per 1,000 days. Over the last 10 years, placement stability has stayed above the national standard, but is showing a downward trend over the most recent years. The rate during 2021 Quarter 2 was 4.93.

Monthly Visits (Out of Home) Months with Visits (Measure 2F)

The 2F measure calculates the percentage of youth in placement who are visited by caseworkers. It looks at both the percentage of in-person monthly contacts, as well as the percentage of contacts that occurred in the child's residence. The National Standard for monthly visits is 95% and the National Standard of monthly visits in the child's residence is 50%. With regards to monthly visits, 2021 Quarter 2 data, San Diego is performing below the National Standard at 92.1%, however, is above the state's performance which is 87.1%. San Diego and the state are both performing above the National Standard for monthly visits in residence at 86.2% and 90.2% respectively.

CWS Focused Outcome Measures Strategy Analysis

In reviewing the Outcome Data Measures where San Diego County and California are performing below the National Standard, and in consultation with CDSS, the Outcome Data Measure of focus will be on

Permanency in 12 months for Children Entering Foster Care (P1). The trend for this measure in San Diego County has generally declined since 2012. CWS has focused on this outcome during the last several SIP cycles. Due to San Diego and California continuing to perform below the National Standard this will be a focus again for this SIP. In light of the state's implementation of the Family First Prevention Services Act (FFPSA) and feedback from stakeholders on the need for increased supports and services to meet the needs of children and families we serve in order to strengthen families and prevent youth from entering foster care, the Service Array and Resource Development Systemic Factor will be included in this SIP. The focus will be on increasing availability and accessibility to prevention services.

For selection of strategies, San Diego County CWS obtained feedback from stakeholders through forums, focus groups, and a survey. The Peer Review provided guidance on best and promising practices that could support Permanency. Additionally, research was reviewed to obtain further guidance on best practices.

The key themes related to Permanency in 12 months and Service Array and Resource Development that were heard through these activities are as follows:

- Relationship with the assigned social worker is important
- Individualized services are needed and valued
- Services are impacted by waitlists
- Culturally relevant services and diverse service providers would benefit families served
- Frequent parent-child visitation and visitation supports are needed

Permanency in 12 Months for Children Entering Foster Care (P1)

While permanency is defined as reunification, adoption, or guardianship, the data shows that for the Permanency in 12 months from entering foster care (P1) measure, reunification is the most common outcome for achieving this goal. Although there are many factors that contribute to successful timely permanency, the research shows a correlation between maintaining or strengthening the parent-child relationship and timely reunification (Trahan, Kim & Hall, 2020)¹. This can be done through quality visitation, parent-child therapy when needed, and parent participation in the child's activities such as school and extracurricular activities, or medical and dental visits. Another important factor found to relate to successful reunification is having a positive working relationship with the assigned social worker (Honovich, Hatton, & Brooks, 2009²; Casey Family Programs, 2018³, Casey Family Programs, 2022⁴). When parents are engaged and encouraged through a strengths-based and solution-focused approach, successful permanency outcomes can be achieved. Additionally, Motivational Interviewing is another approach found to enhance engagement with clients, leading to better outcomes for children and families (Shah, Jeffries, Cheatham, Hasenbein, Creel, Nelson-Gardell & White-Chapman, 2019)⁵.

¹ Trahan, M.H., Kim, J., Bellamy, J., & Hall, J. (June 2020). Parenting Engagement in Foster Care Placement Stability and Permanency. *Journal of Society for Social Work and Research*, 11(2), 211-236. [10.1086/709536](https://doi.org/10.1086/709536)

² Honovich, R., Hatton, H., & Brooks, S. (May 2009). Factors, Characteristics, and Promising Practices Related to Reunification and RE-entry: A Literature Review for the Peer Quality Case Review Process. Northern California Training Academy, The Center for Human Services. [Northern California Training Academy](https://www.nctat.org/Portals/0/Reunification%20and%20RE-entry%20Literature%20Review.pdf)

³ Casey Family Programs. (August 2018). Strategy Brief, Strong Families: What are some effective strategies for achieving permanency? [SF_Effective-strategies-for-achieving-permanency-1.pdf](https://www.caseyfamily.org/wp-content/uploads/2018/08/SF_Effective-strategies-for-achieving-permanency-1.pdf) ([neldna-ssl.com](https://www.caseyfamily.org/))

⁴ Casey Family Programs. (March 2022). Strategy Brief, Strong Families: How can child welfare systems apply the principles of the Indian Child Welfare Act as the "gold standard" for all children? [ICWA As The Gold Standard – Casey Family Programs](https://www.caseyfamily.org/wp-content/uploads/2022/03/ICWA-As-The-Gold-Standard-Casey-Family-Programs.pdf)

⁵ Shah, A., Jeffries, S., Cheatham, L.P., Hasenbein, W., Creel, M., Nelson-Gardell, D., & White-Chapman, N. (2019). Partnering With Parents: Reviewing the Evidence for Motivational Interviewing in Child Welfare. *Families in Society: The Journal of Contemporary Social Services*, 100(1), 52-67. <https://doi.org/10.1177/1044389418803455>

Although the research correlates the importance of the relationship between the social worker and clients, this was also a theme that consistently appeared during the various CSA activities. Stakeholders expressed that having a knowledgeable and engaging social worker was important. Several systems issues emerged that impact engagement and are not uncommon across many jurisdictions including staff turnover, and the number of social workers assigned during the life of a case. While not a strategy included in this SIP, it is important to highlight the current work on staff recruitment and retention that has been an ongoing focus. The following outlines current strategies to impact staff recruitment and retention:

- **Recruitment**
 - Partnering with local universities on recruitment
 - Posting on employment websites
 - Recruitment through community organizations
 - Participating in job fairs
- **Retention**
 - Exit Interviews to analyze qualitative and quantitative data for improvements
 - 360 Evaluations of leadership
 - Workforce Development and Training Units/Advanced Training Units
 - In an effort to support the County's diversity and retention efforts, CWS entered the second annual CWS Mentorship program
 - Diversity, Equity and Inclusion work to ensure an inclusive work environment and diverse workforce
 - Clinical Support Team
 - Coaching
 - Components for Enhancing Clinician Experience and Reducing Trauma (CE-CERT)

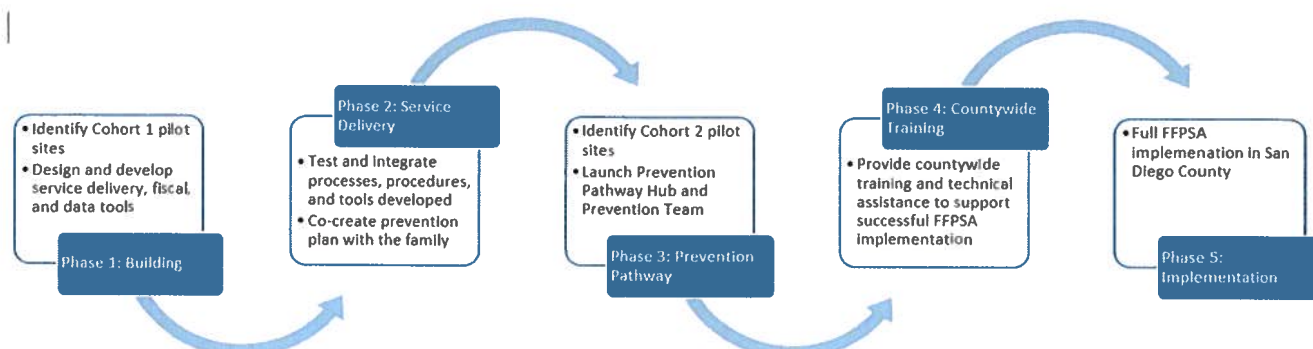
Service Array and Resource Development Systemic Factor

Nationally, a need was identified to reform child welfare policy to enhance support services to keep children safely in their homes. As part of the Bipartisan Budget Act, the Family First Prevention Services Act (FFPSA) was enacted to turn the focus of child welfare to prevent children from entering foster care by keeping children home with their families safely, when possible, through support and prevention services. Locally, CWS has also recognized this need, and has started developing a plan to provide prevention services to families through both the FFPSA and local funding.

The County of San Diego is working with ICF International to assist in service development relevant to the specific requirements of FFPSA and provide technical support (see Appendix B for the San Diego FFPSA Logic Model). With assistance from ICF International, San Diego has begun to engage the community and staff to develop the plan for creating and implementing a system focused on child and family well-being and prevention. This includes the shifting of our system to a yet-to-be-named child and family well-being department and implementing the Prevention Hub to increase access to prevention services. The goal of this work includes shifting the system to focus on prevention and voluntary services, reducing children in foster care with a focus on reducing disproportionality. It includes shifting from "Mandated Reporters" to "Mandated Supporters" and "Hotline" to "Helpline" so that our entire community focuses on a better way for child and family well-being. With this new department, San Diego plans to transform our work with families to gain their trust and increase engagement with social workers who will focus entirely on enhancing protective factors, not removing children. This work is being done through a collaboration of Child Welfare Services, Juvenile Probation and Behavioral Health Services. Representation from the community includes the following partners: various community-based organizations, District Attorney's Office, Interagency Leadership Team, Partners in Prevention Network, area tribes, and individuals with lived experience. Exhibit 4 provides an overview of the plan.

Exhibit 4. FFPSA Implementation Plan (see Appendix C for the Family First Prevention Services Act, Overview)

The implementation of this plan includes five phases:



CWS Strategies

Exhibit 5. Outcome Measure: P1- Permanency in 12 Months for Children Entering Foster Care Strategy #1: Implement Reunification Rescuers and increase use of therapeutic interventions to improve parent-child interactions

Justification Rationale:

San Diego Child Welfare Services has focused on achieving permanency in 12 months during the last two System Improvement Plan cycles; however, continued efforts in this area are needed as both San Diego County and California are performing below the National Standard. Round 4 of the C-CFSR, the National Standard will be 35.2%. As of 2021 Quarter 2, CWS is at 32.1%.

When children are removed from their primary caregivers, their relationship is impacted. Research indicates that supporting and/or strengthening the parent-child relationship correlates with improved permanency outcomes.

The “Reunification Rescuers” will be a case consultation that focuses on the barriers to permanency within 12 months. The Continuous Quality Improvement Policy Analyst (CQI PA) facilitates the consultation with the assistance of a Senior Protective Services Worker (SPSW) from the Centralized CQI Unit. The social worker on the case and their supervisor are present for the meeting. There are times when additional staff, such as other supervisors or senior workers are present. This meeting gives social workers the opportunity to map out and discuss progress and barriers so that they are not making decisions alone. We have found that there are some cases where the social worker could have moved to unsupervised visits, but they were stuck on complicating factors. This process helped them see this and feel comfortable with moving forward with unsupervised. For cases where there are concerns and barriers, this meeting has helped give ideas on how to improve parent-child relationships (i.e. recommending referral to Family Visit Coaching, or Incredible Families), and discuss ways they can assist parents with progressing in visitation.

Parent-Child Interaction Therapy and conjoint therapy have been found to be effective in improving parent-child relationships.

Outcome Measures Affected: P1, P2, P3, P4

Action Steps:

- Implement Reunification Rescuers to map progress in visitation, problem solve any barriers to visitation and discuss additional services and strategies to improve parent-child interactions.
 - Evident Change to assist with developing program theory and logic model
 - Training around purpose and procedures related to Reunification Rescuers
 - Evident Change to complete a process evaluation of the Reunification Rescuers meeting
 - Evident Change to evaluate efficacy of Reunification Rescuers
- Expand use of Parent-Child Interaction Therapy (PCIT) through additional funding
- Use Child and Family Services Reviews to analyze and identify trends in use of parent-child conjoint therapy to inform recommendations
- Based on case review analysis, collaborate with clinical and contracts team to support recommendations regarding conjoint therapy
- Review transportation contracts and services quarterly to identify solutions in order to reduce waitlists
- The Continuous Quality Improvement Unit will monitor through:
 - Reviewing performance quarterly in Items 8 (Visitation with Parents sub-items), 11 (Relationship of Child in Care with Parents) and 12B (Needs Assessment and Services to Parents) of the Child and Family Services Reviews (CFSRs)
 - Quality Case Reviews for CFSRs on visitation plans documented in the case plan, and/or case file.
 - Use Child and Family Services Reviews to identify trends causing waitlists for transportation services to and from visits
 - Monitor number of referrals to PCIT and number of parents served or Monitor waitlists

Systemic Changes:

- Develop program theory and key outcomes for Reunification Rescuers to promote consistent implementation.

Educational/Training Needs to Achieve this Strategy:

- Training on best practices to promote, support, and maintain positive relationships between child(ren) in foster care and their mother and father or other primary caregiver(s) from whom the child had been removed from through activities other than visitation.

Roles of Other Partners in Achieving this Strategy:

- Collaboration with service providers
- Collaborate with Evident Change for research and evaluation

Evaluating and Monitoring:

The Continuous Quality Improvement Unit will monitor through:

- Reviewing performance quarterly in Items 8 (Visitation with Parents sub-items), 11 (Relationship of Child in Care with Parents) and 12B (Needs Assessment and Services to Parents) of the Child and Family Services Reviews (CFSRs).
- Quality Case Reviews for CFSRs on visitation plans documented in the case plan, and/or case file.
- Use Child and Family Services Reviews to identify trends causing waitlists for transportation services to and from visits
- Monitor number of referrals to PCIT and number of parents served or Monitor waitlists

Community Reflections

- Increase family finding efforts for both new and existing cases. If the Agency identifies family or Non-Relative Extended Family Members (NREFMs), they could explore whether the family or NREFM could support the family by supervising visits - either on a consistent schedule or for important family events such as holidays, birthdays, church, funerals etc. These non-placement supports could also assist by providing transportation of a parent or child to/from the visits.
- Provide visitation setting where the parent can parent and not simply have fun visits. Too often parent's visitation is in settings such as a visitation room or park where there is limited opportunity to do parenting activities such as homework or preparing for bedtime. Opportunities for parents to attend doctor's appointments, participate in the child's OT/ PT/ Speech and other therapeutic services should be explored and encouraged.
- Create intentional resources, programming, and communication strategies that encourage and support fathers being engaged in their children's lives.
- Offer neutral, third-party opportunities for children and their families to heal and communicate through therapy that is culturally and demographically appropriate. These opportunities will allow families to be vulnerable and feel confident working through past traumas.
- Reassess visitation every 30 days. Explore more opportunities to progress visitation – e.g., modified unsupervised visitation where the parent can be alone in a visitation room and the social worker or monitor can be down the hall and pop in.

Exhibit 6. Outcome Measure: P1- Permanency in 12 Months for Children Entering Foster Care Strategy #2: Incorporate SDM and CANS into CFTs as well as use SOP to strengthen social work engagement practice

Justification Rationale:

Research and stakeholder feedback highlighted the importance of the relationship between the caseworker and the family. With staff turnover, ongoing training is needed to support social workers in utilizing engagement tools and strengthen their use of these tools.

Stakeholders reported that Child and Family Team (CFT) meetings are helpful in assessing needs, and case planning when they are facilitated well. Rather than being used as separate tools, Structured Decision Making (SDM) tools, the Child and Adolescent Needs and Strengths (CANS) assessment, and CFT meetings should be used together to assess needs and strengths of families, develop case plans, and better engage families. The SDM Reunification Reassessment tool and CANS can be used together in the CFT meeting to engage the family in case planning and discussing what is expected of them in order to reunify. This can enhance transparency and trust, thereby supporting engagement. Furthermore, there is evidence supporting the effectiveness of SDM in promoting timely exits to permanency (Carnochan, Lee, & Austin, 2013)⁶.

This strategy is in line with CDSS priority for training as "Engagement" has been selected as a focus for FY 2022-2023 Integrated Core Practice Model (ICPM) required training.

Outcome Measures Affected: P1, P2, P3, P4, P5

Action Steps:

- Increase utilization of Safety Organized Practice (SOP) coaching and training hours offered through the training academy

⁶ Carnochan, S., Lee, C., & Austin, M.J. (May 2013). Achieving Exits to Permanency for Children in Long Term Care. *Journal of Evidence-Based Social Work*, 10, 220-234. [10.1080/154333714.2013.788952](https://doi.org/10.1080/154333714.2013.788952)

- Evident Change to complete research and identify ways the Structured Decision Making (SDM) Reunification Reassessment tool can be used to engage parents in case planning and make recommendations
- Evident Change to review policy on SDM Reunification Reassessment tool
- Revise SDM Reunification Reassessment tool guidance in policy to support recommendations
- Evident Change provide training and coaching on use of the SDM Reunification Reassessment tool and integrating SOP for engagement with parents
- Evaluate effectiveness of Child and Family Team (CFT) meetings to identify what is working well and areas for improvement in engagement
- Provide training at least once yearly through CFSR Feedback Presentations on importance of in-person contacts with clients on engagement and best-case practice.
- Work with training academy to identify training curriculum to support:
 - Engagement with families
 - Rapport and relationship building with children
 - Quality case notes documentation.
- The Continuous Quality Improvement Unit will monitor through:
- Monitor coaching and training hours through report from training academy
- The Continuous Quality Improvement Unit will review performance quarterly in Items 13 (Child and Family Involvement in Case Planning), 14 (Caseworker Visits with Child), and 15 (Caseworker Visits with Parents) of the Child and Family Services Reviews (CFSRs).
- Monitor social worker monthly in-person contacts with mother and father on active Family Reunification cases in the Key Data Report (KDR).
- Monitor use of the SDM Reunification Reassessment tool through reports from Evident Change.
- Evaluation of CFT meetings will include interviews and focus groups with stakeholders and surveys

Systemic Changes:

- Improve service delivery to children and families through engagement

Educational/Training Needs to Achieve this Strategy:

- Ongoing training for staff on use of SDM Reunification Reassessment and engagement tools.
- Ongoing training/coaching for staff on use of SOP engagement tools.

Roles of Other Partners in Achieving this Strategy:

- Collaborate with CFT facilitation service provider
- Collaborate with Evident Change

Evaluating and Monitoring:

The Continuous Quality Improvement Unit will monitor through:

- Monitor coaching and training hours through report from training academy
- Reviewing performance quarterly in Items 13 (Child and Family Involvement in Case Planning), 14 (Caseworker Visits with Child), and 15 (Caseworker Visits with Parents) of the Child and Family Services Reviews (CFSRs).
- Monitor social worker monthly in-person contacts with mother and father on active Family Reunification cases in the Key Data Report (KDR).
- Monitor use of the SDM Reunification Reassessment tool through reports from Evident Change.

- Evaluation of CFT meetings will include interviews and focus groups with stakeholders and surveys

Community Reflections

- Continue to engage families, children and youth in the decision-making processes. Ensure the family/child/youth voice and choice is heard.
- Families value the use of parent partners with lived experience.
- Limit the number of social workers assigned to a case to facilitate relationship and trust building.
- Consider new supports such as lived experience coaches to lead rapport building with youth, influence youth-social worker interaction and communication, and support youth in formal meetings including (Child-Family Team meetings, meetings with social workers, and court hearings) and a digital communication platform that is shared between youth, parents, social workers, and caregivers that includes case file notes, meeting dates, and important documents.
- Change standards/culture of case file documentation to include trauma informed, strength-based language, tangible recommendations for children and families and use as a storytelling tool for a child will see these documents in the future. Develop and implement new standards for case file documentation that demonstrates strength-based language and is trauma informed. Notes and recommendations made by social workers should be clearly written and accessible for children and families to understand and work towards.

Exhibit 7. Systemic Factor - Service Array and Resource Development Strategy #1: Increase prevention services

Justification Rationale:

As stated above, nationally, a need was identified to reform child welfare policy to enhance support services to keep children safely in their homes. As part of the Bipartisan Budget Act, the Family First Prevention Services Act (FFPSA) was enacted to turn the focus of child welfare to prevent children from entering foster care by keeping children home with their families safely, when possible, through support and prevention services. CWS has also recognized this need and has started developing a plan to provide prevention services to families through both the FFPSA and local funding. Feedback obtained through Stakeholder Forums, and focus groups highlight that there is a wide array of services in San Diego, however, there is a need for more ongoing work to connect families to the community-based services. Stakeholders identified that an area needing improvement is awareness of and access to existing services in the community. The implementation of a Prevention Hub will provide a community-based access point to receive prevention services to support and strengthen families. The target population for these services are children ages 0-18 who are at imminent risk of entering or re-entering foster care. The goal is to provide services to safely stabilize families in order to prevent child welfare involvement and removal. However, if removal is necessary, in cases where the children have reunified these prevention services can help decrease recurrence of maltreatment and re-entry into foster care.

Outcome Measures Affected: S2, P4

Action Steps:

- Plan and Implement Prevention Hub:

<ul style="list-style-type: none"> ○ Procure contract for Prevention Hub by issuing Request for Proposal (RFP) ○ Secure contract for Prevention Hub ○ Develop policies and procedures for the Prevention Hub ○ Training for Prevention Hub Child Welfare Services staff ○ Training for Prevention Hub contractor staff ○ Establish Key Performance Indicators to measure performance ○ Create plan for Media Communications to promote the Prevention Hub • Increasing availability and access of mental health, substance use, parenting education and kinship navigation services through FFPSA and the Prevention Hub with the intention of collaborating with organizations that have a diverse workforce representative of the community • Work with ICF International to develop a child and family well-being department to integrate and streamline child and family serving systems, such as First 5 San Diego, home visitation programs, child abuse prevention efforts, and child care • Implement Community Response Guide to increase access and connection to prevention services timely <ul style="list-style-type: none"> ○ Partnering with Evident Change to facilitate community partner meetings ○ Researching other jurisdiction's guides ○ Structuring the guide with community input ○ Publishing guide • Monitor impact of prevention services on recurrence of maltreatment and re-entry through quarterly review of S2 and P4 measures.
<p>Systemic Changes:</p> <ul style="list-style-type: none"> • Increasing agency collaboration with community-based organizations • Increasing prevention funding • Increasing access to prevention resources
<p>Educational/Training Needs to Achieve this Strategy:</p> <ul style="list-style-type: none"> • Training for staff and the community on prevention services available.
<p>Roles of Other Partners in Achieving this Strategy:</p> <ul style="list-style-type: none"> • Evident Change to assist with planning and creating the Community Resource Guide • Partnering with community-based organizations to serve families • ICF International to assist with structural reorganization and change management for the department of child and family well-being
<p>Evaluating and Monitoring:</p> <ul style="list-style-type: none"> • Using Key Performance Indicators, once developed, to measure performance of Prevention Hub • Monitor wait lists to ensure decrease in wait times for access services • Monitor Child Welfare Referral statistics to measure change over time • Monitor Recurrence of Maltreatment rates • Monitor foster care entry rates to measure change over time • Monitor foster care re-entry rates to measure change over time • Monitor number of children requiring residential treatment

Community Reflections

- Extend hub operating hours beyond the traditional 9a-5p business hours. By having early morning, evening, and weekend hours of operations, families and children will be able to access services and support during critical times.
- Hub operated by community-based organizations. By having staff from the community serve as the greeters/directional staff to guide families in locating resources, the Hub reflects a community approach to supporting families and children. The integration of Child Welfare Services staff will influence the culture of CWS being seen as a supportive resource.
- The Hub should be a place of empowerment, support, and real-time solutions. Include private rooms for children and families to have confidential conversations with service providers.
- Provides onsite childcare for families utilizing resources to give parents and caregivers the opportunity to seek individualized resources and/or complete the required process of applying to services
- Ensure basic needs are met. This includes education, career, and training resources that support the advancements of children and parents to have the means to live a sustainable life in San Diego County.
- Increase awareness of available mental/behavioral health services and supports and how to access them. Include diverse resource providers that are culturally representative of children and families selected by children and families.
- Utilize more warm handoffs between CBOs and CWS.
- Utilize more trauma-informed, harm reduction strategies. Include a framework of active listening as a foundational relationship practice.

Probation

Summary of Probation Outcome Measures Performing Below National Standard

Probation used 2021 Quarter 2 data in determining what CFSR measures were above and below the national standard.

Permanency in 12 months for children entering foster care (Measure P1)

This measure tracks the percent of children discharged to permanency within 12 months of entering foster care. This is an outcome Probation is focusing during this SIP cycle. At the time we chose to focus on P1, probation was performing below the National Standard at 34.9%, but above the State's Performance. More recently, we surpassed the National Standard and are performing at 46.9%. Probation has historically fluctuated in its performance in meeting this standard and performance has fluctuated up to 46.8% with a low of 16.7%.

Permanency in 12 months for youth in foster care 12-23 months (Measure P2)

This measure looks at all youth who are in foster care between 12 and 23 months who discharged from foster care to permanency within 12 months of the first day of the 12-month period. Within this standard, Probation is performing below the national standard at 22.2% and not meeting the national standard of 43.6%. Our data shows that six youth out of 27 youth met that outcome.

Permanency in 12 months for youth in foster care 24+ months (Measure P3)

This measure tracks the percentage of youth who had been in foster care for 24 months or more, who discharged to permanency within 12 months. Probation is performing below the national standard at

28.6% and not meeting the national standard of 30.3%. Our data shows that 2 youth out of 7 youth met that outcome.

Monthly Visits (Out of Home) Months with Visits (Measure 2F)

This measure calculates the percentage of youth in placement who are visited by caseworkers. It looks at both the percentage of in-person monthly contacts as well as the percentage of contacts that occurred in the youth's residence. Probation is performing below the national standard at 75.2% and not meeting the national standard of 95%.

Probation Focus Outcome Measures Strategy Analysis

Exhibit 8. Outcome Measure: P1- Permanency in 12 Months for Children Entering Foster Care

Strategy #1: Implement Readiness Assessment Tool to ensure appropriate and timely services to increase permanency and reduce re-entry.

Justification Rationale:

At the time P-1 was selected, Permanency in 12 months, probation was performing below the National Standard at 34.9%, but above the State's Performance. More recently, probation surpassed the National Standard and is performing at 46.9%. Although one could say probation has met the goal, it is important to note that over the past five years, the percentage of youth discharged to permanency has fluctuated up to 46.8%, with a low of 16.7%. Additionally, although probation has improved and met the National Standards, the P-4 measure, Re-Entry to Foster Care in 12 months, which has historically been used when analyzing P-1 measure, has significantly increased. One could opine that although the permanency rate has improved, the way in which probation youth achieved permanency needs review because of the increased re-entry rate.

Probation will research and implement a Readiness Assessment Tool to help officers determine youth and family readiness for reunification. The youth and family will be assessed at the onset of placement and reviewed at the 90-day mark in preparation for their return home to coincide with program completion. Probation is hopeful that through continued targeted work with P-1, probation will solidify its current trajectory and reduce the re-entry rate.

Outcome Measures Affected: P1, P4

Action Steps:

- Implement Readiness Assessment Tool to determine family's readiness for reunification.
 - Research existing Readiness Assessment.
 - Develop a Readiness Assessment Tool
 - Develop policies and procedures
 - Train officers in the use of the Readiness Assessment Tool
 - Implement Readiness Assessment Tool
- Bi-annual quality assurance tracking will be conducted to identify trends and monitor compliance with action steps and all policy and procedures.

Systemic Changes: Policies and procedures will be developed to support these strategies and disseminated to all juvenile probation staff. Compliance with policies and procedures will be monitored through quality assurance measures.

Educational/Training Needs to Achieve this Strategy: Available resources and training will be sought from CPOC and Judicial Council. Officers will be trained in policies and procedures.

Roles of Other Partners in Achieving this Strategy:

- Collaborate with CPOC and Judicial Council on training opportunities.

Evaluating and Monitoring:

- The use of SPO Audit Tool to monitor compliance with policies and regulations in support of strategies.
- Bi-annual evaluation of performance trends related to audit results. Placement Leadership will meet quarterly to review progress of strategies.
- Evaluation of the results of the Readiness Assessment and subsequent services and supports needed to improve familial readiness for reunification.

Community Feedback

- Establish a consistent partnership between Juvenile Probation and Foster Alumni and Youth Community Empowerment Subcommittee (FAYCES)
- Develop training that includes child/adolescent development, strength-based language, and communication skills.
- Consider adding tools that would support youth development. Suggestions included an aptitude test that reflects youth strengths and interests and the Adverse Childhood Experiences (ACEs) Quiz
- Recognize mental wellness as a basic need for every youth interfacing with the Juvenile Justice System and offer therapy access to every youth.

Exhibit 9. Systemic Factor - Service Array

Strategy #2: Partner with community-based organizations to ensure substance abuse and mental health services in the community are accessible, trauma informed, and culturally responsive to meet the needs of probation youth to ensure timely permanency.

Justification Rationale:

San Diego County has an array of services; however, it is evident there are gaps for services specific to substance abuse treatment and Specialty Mental Health Services. There are also identified gaps in service provision specific to those which are culturally responsive. The quality of our Service Array has a direct correlation to the services available to our youth and families to avoid initially entering foster care and for those youth and families who reunify. The goal is to ensure services are accessible to families in their own communities, appropriate, culturally responsive and trauma informed. Another goal is to expand contracts and capacity to address current and evolving needs. We want to maintain continuous contract oversight to increase accountability of contractual obligations.

Outcome Measures Affected: P1, P2, P3, P4, 4B

Action Steps:

- Develop and implement a Service Array committee.
- Analyze and review current services.
- Align with AB2083 initiatives in that services are to be culturally responsive, trauma informed and accessible.
- The tracking mechanism for this strategy would be the Community Resource Directory (CRD). Utilizing the CRD database to ensure probation and provider compliance with timely referral to services and program completion incorporated into the bi-annual review.

Systemic Changes: Evaluation and expanding our collaborative efforts in service delivery.

Educational/Training Needs to Achieve this Strategy:

Quarterly Community Resource Directory expos for line staff. Continue to educate staff on AB2083 initiative.

Roles of Other Partners in Achieving this Strategy:

- Collaboration with service providers to ensure the viability of services provided to youth and families.
- Continue collaboration with county AB2083 System of Care work group and Interagency Leadership Team.

Evaluating and Monitoring:

- Contract oversight through regular reviews of service provision.
- Reviewing outcome measures as identified by the AB2083 MOU.
- Placement Leadership will meet quarterly to review progress of strategies.

Community Reflections

- Anticipate and help families navigate gaps in services, especially mental and behavioral health services. Identify and recommend community-based services that are able to provide evidence-based family engagement services and services culturally tailored to specific family needs.
- Develop an individualized and strength-based Growth Plan that incorporates results from different assessments. Include youth incentive/rewards for good behavior and progressing in their Growth Plan
- Provide a pipeline to services that are inclusive of youth's disabilities, mental health needs, strengths, interests, crime-related experiences, etc.

C. Prioritization of Direct Service Needs

- The prioritization and selection of direct service needs funded with CAPIT/CBCAP/PSSF began with the CSA process, stakeholder input from forums, focus groups and peer review process. Data trends and outcome measures were analyzed to determine continued needs and gaps in service delivery. Existing contracts receiving CAPIT/CBCAP/PSSF were reviewed to assess for procurement and/or the need for a new Request for Proposal (RFP). As established in the CSA, it was noted that San Diego has a wide array of services available but there are gaps and delays in access. Direct Services selected will focus on case management, parent education, support services to strengthen families and nurture the development of healthy behaviors, navigation of resources and services, and peer support.
- Evidence-based and/or evidence-informed programs bring a proven set of tools, techniques and framework. The California Evidence-Based Clearinghouse for Child Welfare (CEBC) is a critical tool used to identify, select and implement evidence-based programs. Programs that have shown to have the desired effect are considered when making program selection and funding. San Diego continues to partner with Evident Change and University of California San Diego to evaluate, gather data and research on programs selected and funded with CAPIT/CBCAP/PSSF.
- Populations at greatest risk of child maltreatment as established in the CSA include children under the age of 1. In 2020, children under the age of one had the highest rate of allegations (65 per 1,000). Infants are also more likely to have substantiated child abuse allegations. Children of color, specifically African American, Native American and Latino have the highest rate of substantiated allegations.
- San Diego County will submit the mandated CAPIT/CBCAP/PSSF report annually to the state. Any changes to program selection or activity that is funded by CAPIT/CBCAP/PSSF will be reviewed with OCAP and will ensure that the necessary documentation and approvals are obtained

4. Child Welfare/Probation Placement Initiatives

Joint Initiatives

Child and Family Wellness System of Care (AB 2083)

Interagency Leadership Team

As outlined in the AB 2083 Memorandum of Understanding (MOU), Executive Leadership from the County have formed an ILS, which meets monthly and serves as the governing and coordinating body of the AB2083 collaborative. The ILT includes executives from BHS, CWs, Probation, Regional Center, SDCOE, Department of Rehabilitation, Tribal Partners and San Diego Juvenile Court. With consulting support from the Social Policy Institute at San Diego State University, the ILT meets monthly to ensure the needs of youth are being addressed, by conducting in depth case reviews for youth with complex needs and interacting with multiple systems.

San Diego's ILT serves the needs of youth with complex care needs but is working towards child and family wellness system of care. The ILT has established concrete goals, with associated key performance indicators that align with and support the pilot guidelines:

- To create an Integrated Child, Youth and Family Wellness System of Care so all San Diego children, youth and their families receive equitable, accessible, and culturally/developmentally appropriate services/supports to increase wellness:
- Provide an integrated continuum of services and formal/informal supports to meet the needs of children who have complex care issues.
- Provide highly coordinated, integrated, and innovative practice approaches that includes wellbeing services and supports to youth to achieve permanency, wellbeing, and valued/successful adulthood.
- System Partners affirm a mutual commitment to ICPM shared values.
- Utilize feedback from the Interagency Placement Committee (IPC) to share trends, address service/placement gaps, identify systemic barriers preventing timely placement and services, develop and strengthen collaborative authority, and highlight cross-system success.

Integrated Core Practice Model (ICPM)

The ICPM guides the County's practice to ensure that youth and family voice are at the forefront of decision making. As a result, CWS, BHS, Probation and Regional Center frequently convene at the Child and Family Team Meeting (CFTM) to communicate regarding the best interests of the youth. In addition to the ILT, barrier buster meetings are held for youth with higher placement needs in order to problem solve and identify barriers to placement needs in order to problem solve and identify barriers to placement, in addition to collaboration with the Regional Center via liaisons to address dual agency youth.

System of Care Partnerships

Continuum of Care Reform (AB 403)

Intense collaboration was needed to implement the components of Assembly Bill 403. As a result of this legislation, CWS, Probation, BHS and other partners worked closely to implement the following:

- **Interagency Placement Committee (IPC)**- A multi-disciplinary team with various system partners/experts reviewing and consulting on placements/services for youth with complex needs and interacting with multiple systems.
- **Integrated Core Practice Model**- As stated above, ICPM guides the County's practice to ensure that youth and family voice are at the forefront of decision making. It brings together child welfare, probation, behavioral health and other partners in delivery of timely, effective, and collaborative services to children, youth and families with guiding principles and practices that moves from working in an individual system/agency to working in a cross-system teaming environment.

Pathways to Well-Being

In December 2011, as a result of the Katie A lawsuit, the State took a series of actions to transform the way children and youth in foster care, or at risk of placement in California's foster care system, access mental health services. As a result, the Core Practice Model (CPM) was issued in March 2013 and implemented locally. San Diego established its Pathways to Well-Being (PWB) partnership to implement requirements of the CPM.

PWB is a result of close collaboration between BHS, CWS, Probation, Office of Education, Regional Center and Parent/Youth Partners in the provision of services. Working together to support children and families is fundamental and was heightened during the pandemic, which was evidenced through joint committees established to ensure multi system input promoted and maintained access, timeliness, quality, and measured data outcomes in PWB and Continuum of Care Reform (CCR) related service delivery.

Child and Family Team meetings (CFTM)

CFTMs bring together youth, family, natural and community supports, and professionals to discuss needs of the family under the belief that children and families have the capacity to ameliorate the issues that brought them to the attention of CWS or Probation if given the support and resources. In order to meet the needs of the family, CFTMs are offered in-person, virtual, telephonic, and hybrid to allow for a broader range of access for all participants, regardless of proximity or connectivity. The CFT Facilitation Program is funded by CWS, BHS, and Probation which illustrates the joint commitment and collaboration across systems.

Since the implementation of FFPSA, Probation has added pre-disposition CFTs. Probation's goal is to expand the use of CFTs with our Reasonable Candidacy youth in the near future.

California Integrated Practice Child and Adolescent Needs and Strengths (CANS)

CWS implemented the CANS assessment tool, which is a multi-purpose tool that supports decision-making, including level of care and service planning, allowing for the monitoring and outcome of services. When used as part of the CFT process, the CANS assessment can help guide conversations among CFT members about the well-being of children and youth, identify their strengths and needs, support care coordination, aid in case planning activities, and inform decisions about placement. BHS built on the

CANS-50 by adding the modules utilized by CWS with joint trainings offered to the workforce across the systems.

Family Urgent Response System (FURS)

Effective July 1, 2021, BHS, CWS, and Probation jointly funded and successfully implemented the FURS to provide local trauma-informed mobile support to foster youth experiencing a crisis who are identified through a State-run hotline, in compliance with Assembly Bill 79 (AB-79) and Senate Bill 80 (SB-80). It provides current and former foster youth (up to age 21) and their caregivers with immediate, trauma-informed support by caring and trained professionals when they need it. FURS helps improve permanency outcomes by helping with placement stability. San Diego provides the 24/7 mobile response through a network of contracted providers, with Mental Health America as the lead agency, who are able to respond immediately when resource families and/or foster youth need assistance.

Implementation of Family First Prevention Services Act (FFPSA)

Part 1 and Part 4 of the FFPSA was launched in the County of San Diego through the collaborative efforts of Child Welfare Services, Juvenile Probation, and Behavioral Health Services, along with representation from the community including, but not limited to, the following partners: community-based organizations, Interagency Leadership Team, District Attorney's Office, tribes, those with lived experience, and Partners in Prevention Network.

The provision of evidence-based services will ensure children, youth, and families across diverse backgrounds have more equitable opportunities to effectively overcome barriers to providing safety. Providers in the County of San Diego are currently providing Functional Family Therapy, Healthy Families America (First Five, First Steps), Motivational Interviewing, and Parent-Child Interaction Therapy. There are many more prevention-focused practices provided to children, youth, and families in the county. Therefore, the County of San Diego is taking steps to expand the use of evidence-based practices from California's state plan and is working with agencies to add more practices to the Title IV-E Prevention Services Clearinghouse.

A Comprehensive Prevention Plan (CPP) is being developed through monthly meetings between BHS, CWS and Probation to plan the future landscape of evidence-based prevention services, along with the changes to congregate care. San Diego contracted with ICF for technical assistance for FFPSA Part 1 Implementation. San Diego completed CPP readiness assessments with providers. Based on readiness assessment outcomes, San Diego Center for Children (SDCC), South Bay Community Services (SBCS), and North County Lifeline were selected as the initial pilot sites to begin CPP implementation. Other partners such as First 5 San Diego and YMCA are also participating in the development of the CPP.

In addition to expanding prevention services for Part 1 of the FFPSA, implementation of the Qualified Individual (QI) as required for Part 4 began in October 2021. Licensed Mental Health Clinicians from the BHS Pathways to Well-being team began conducting independent assessments regarding the needs of youth prior to placement in a STRTP. Prior to implementation, representatives from BHS, CWS, Probation, and Juvenile Court had multiple meetings to review the FFPSA requirements and to develop the most streamlined process for implementation. BHS, CWS and Probation meet regularly to address challenges regarding the QI referral and assessment process and formed a committee to evaluate local services/needs and complete the Wraparound County Plan.

Project SAFE in collaboration with SDCOE

Project Safe From Exploitation (SaFE) is a demonstration project aimed to protect children and youth from human trafficking and other forms of violence, exploitation and victimization through delivering human trafficking prevention education to students, educators, and other school staff.

This program assists schools in developing and implementing Human Trafficking School Safety Protocols, which facilitates reporting trafficking concerns to law enforcement and child welfare services, notifying parents and caregivers, and when appropriate, referring students to supportive, person-centered, trauma-informed, culturally responsive, and linguistically appropriate services.

Project SaFE positively influences permanency for children who are placed out-of-home due to challenging behaviors (i.e., running away, truancy, substance use) by strengthening a child's knowledge about human trafficking, increasing their perception of risk, and building healthy behaviors that support a child transitioning to a family setting with parents, relatives, adoption, or guardianship. This program supports child safety from multiple forms of violence, which promotes a child's ability to remain home or return home, which increases the likelihood of permanency within 12 months.

Child Welfare Initiatives

Level of Care Protocol (LOCP)

The LOCP is the statewide foster care rate structure designed to support caregivers in providing care and supervision to meet the needs of each child/NMD. LOCP switches the funding from an age-based rate structure to one that provides funding based on what the caregiver is providing to parent the child or youth in their home. It supports permanency efforts by further stabilizing the home by providing the funding the caregiver needs to support the child or youth's well-being. CWS has created a specialized team of staff to conduct LOCP assessments for all children in out of home placement, ensuring the right level of supports are given to resource families to meet the needs of children/youth in their care.

Innovation in Foster Care: Cash Transfer Program for Youth at Risk and Families

The Board of Supervisors allocated a portion of the American Rescue Plan Act (ARPA) funding to implement a guaranteed income program targeting families with children at risk of entering foster care. The program is anticipated to serve up to 500 families with children at risk of entering foster care, particularly in communities of color with higher rates of poverty. Eligible families will receive monthly income subsidies for up to two years and have access to equitable opportunities to participate in supportive services. The Cash Transfer Program is intended to increase resiliency in impacted communities, promote family strengthening and prevent child maltreatment.

Family Visit Coaching

Family Visit Coaching is based on the Visit Coaching model developed by Dr. Marty Beyer as a method to promote active engagement between the coach and parents before, during, and after visitation with the child. The purpose of visit coaching is to help parents articulate their children's needs to be met in visits; prepare parents for their children's reactions; help parents plan to give their children their full attention at each visit; appreciate the parents' strengths in responding to each child needs; and help parents cope with their feelings. Through these actions, visits may be more productive resulting in decreased time to return home. Research has shown a positive correlation between parents maintaining visitation with their

children while in out-of-home care and eventual reunification of the children with their parents. Visitation leads to increased self-esteem and more stable placements for the children.

Family Visit Coaching was implemented during the Title IV-E Waiver Demonstration Project that expanded to San Diego in 2014 and ended in September 2019. This program has been sustained due to the findings from evaluation that Evident Change, formerly known as National Council on Crime and Delinquency (NCCD) conducted. The evaluation of this program found in pre- and post-tests of parenting skills, using a shortened version of the independently validated Parenting Skills Assessment, 10th version, there were statistically significant improvements in 14 out of the 15 parenting domains. Furthermore, interviews with program participants showed that parents who participated in the program, versus parents in the general child welfare population, had improved relationships with their children, better practical parenting skills, and a greater sense of self-efficacy (Mixed-Methods Evaluation of Family Visit Coaching, NCCD, January 2020).

Partnerships in Education

San Diego County Office of Education (SDCOE), CWS, and 42 public school districts have long partnered on efforts to ensure educational success for children and youth in foster care. SDCOE partners with BHS to support the behavioral health needs of students throughout San Diego.

SchoolLink

BHS partners with school districts to offer outpatient specialty mental health services on school campuses. Over 30 SchoolLink providers deploy clinicians to designated schools who work closely with school personnel to engage, support youth/families, and provide outreach.

School Success Project

School Success Project educational liaisons are SDCOE Foster Youth Services Coordinating Program staff who are out stationed and co-located with social workers at many CWS offices. Education Liaisons serve as subject matter experts and receive referrals for education related services. The School Success Project began in and is jointly funded by SDCOE and CWS.

School of Origin Transportation

A Memorandum of Agreement (MOA) between CWS, SDCOE and all local educational agencies was developed to provide transportation for youth in foster care and ensure that they are able to attend their school of origin. All parties contribute to cost sharing for this agreement to meet the requirements for transportation to school of origin under the Every Student Succeeds Act.

Foster Academic Success in Education (FASE)

FASE is a three-year pilot between the County, SDCOE, and Sweetwater Union School District to support foster youth across the local middle and high schools. Participating school districts developed a MOA to outline the goals and responsibilities of each agency. Due to its success, the program expanded to other schools.

CWS identified an educational social worker to work with the youth, school staff, resource parents, and social worker to remove barriers and support the youth in their education by attending IEP meetings, addressing transportation barriers, assisting with college applications, tutoring and any other supports needed.

To support efficacy of the program, the County has partnered with a local university to conduct an evaluation of the program, which includes interviews and survey results with resource parents and participants.

Collaborative Relationships with Local Tribes

The County has a long standing and rich relationship with the native tribes who have inhabited the region for centuries, including Native American reservations, represented by 17 Tribal Governments, the most in any county in the United States.

Indian Specialty Unit (ISU)

The ISU was established in 1992 to bring all investigations and cases involving Native children to one unit. Social workers in the ISU receive comprehensive Indian Child Welfare Act (ICWA) training and develop skills to collaborate with tribes, tribal representatives, tribal agencies and other community partners to provide culturally responsive services and placements for Native American families.

Revised in 2019, CWS created a protocol for working with Indian families, children and tribes which promotes collaborative efforts between CWS and tribal entities through the effective implementation of ICWA and protection of Indian children at risk for abuse or neglect while improving family preservation services to Indian families.

San Diego Tribal Justice Collaborative

Led by the Presiding Judge of San Diego Juvenile Court and Tribal Court Judge from the Intertribal Court of Southern California, CWS and Probation participate in the collaborative, with Native American leaders and community advocates to address system issues regarding the disproportionate number of Native youth involved with CWS and Probation.

Tribal STAR

Created in 2003, Tribal STAR provides a training and technical assistance program that focuses on building collaborations to improve outcomes for Native American children in the juvenile dependency system to social workers, legal advocates, Tribal Nations and tribal agencies across Southern California. "STAR" is an acronym for Successful Transitions for Adult Readiness, honoring the original program from which Tribal STAR evolved in 2003. As part of this important work, San Diego participates in the 7th Generation workgroup, a community advisory workgroup comprised of Tribal Social Services, Tribal leadership, academics, social services, probation, legal services and other related resources to promote national efforts to improve outcomes for Indian children and families.

Cultural Responsiveness Academy (CRA)

The CRA is a year-long learning experience designed to address issues around disproportionality, disparity of services, and bias in decision-making that continue to impact families. The CRA incorporates input from community partners/stakeholders and is delivered to all levels of the workforce and has focused on the African American communities, Native American communities and father engagement. The training is conducted in partnership with Child Welfare Development Services through San Diego State University, Academy for Professional Excellence.

Father Inclusion

Continuing Father Champions Workgroup

As part of the previous System Improvement Plan, CWS focused on father engagement as one strategy to improve re-entry outcomes. CWS will continue to utilize the Fatherhood Champion Committee with a goal to increase father engagement in CWS through father-centered services and support. The committee consists of CWS staff and community partners who have collectively helped identify gaps in services and share best practices when working with fathers.

Cultural Responsiveness Academy on Father Engagement

As stated above, CWDS offers a unique learning experience to Child Welfare Services through the CRA. In September 2020, the County of San Diego offered the CRA on Engaging Fathers Involved in the Child Welfare System. The CRA is a 9-month training opportunity for staff at all levels that focuses on father engagement. This series has been offered again, beginning in September 2022.

Family Support Liaisons

The Family Support Liaisons (FSL) program aims to reduce the disproportionate number of African American children in the child welfare system by strengthening the relationship between CWS and families to create better environments and outcomes for African American families for the first year and expand to serve immigrant and refugee families countywide. The FSL provides education and support to families involved in the child welfare system on child welfare laws, system processes, communication, and early intervention strategies that enhance child safety and help families better understand and navigate the multiple processes involved in the Child Welfare System.

Substance Use Disorder Partnerships

BHS has expanded the substance use disorder treatment system through the implementation of the Drug Medi-Cal Organized Delivery System (DMC-ODS). DMC-ODS provides improved services including withdrawal management, expanded case management, peer services, post-treatment recovery services, residential treatment, physician consultation, and medication assisted treatment services (MAT). This transformative blend of new and expanded services provides a full continuum of integrated substance use disorder treatment and is designed to serve BHS clients throughout the entire recovery process. Specific examples include:

- Developmentally appropriate SUD treatment services and recovery programs to help youth reach their full potential by achieving a substance free lifestyle. These programs provide treatment for adolescents and their families, ensure access to care, and promote self-sufficiency through education and/or employment. Services are offered throughout the county and include outpatient treatment, crisis intervention, and residential treatment services. Teen Recovery Centers (TRC) provide outpatient and intensive outpatient substance use treatment services and recently expanded to offer early intervention services for adolescents ages 12 to 17 in school and community settings. Treatment services include individual and group counseling, family participation and counseling, education on substance use and recovery/resiliency, harm reduction, referral to MAT as needed, and introduction to prosocial activities. Services are provided countywide at as many as 27 different locations, including high schools.

- Countywide Outpatient Perinatal Programs serve women and adolescent females ages 15 and older who are pregnant and parenting and offer gender responsive SUD treatment and other therapeutic interventions to address such issues as relationships, sexual and physical abuse, and parenting. Additional services include parenting classes, childcare, and mental health services for children.
 - Teen Group Homes focus on addressing the elevated needs of teens whose need cannot be met at an outpatient level. The intensive services are designed to support the youth in achieving treatment goals.

Probation Initiatives

Probation Transformation 7-Part Series (facilitated by Annie Casey)

From September 1, 2021, through December 15, 2022, all Youth Development and Community Support Services (YDCSS) staff and community partners attended a seven-session Probation Transformation Series, facilitated by the Annie E. Casey Foundation. This special event allowed staff to share ideas, discuss YDCSS' strategic plan, and unpack the future of justice reform for the department. The series focused on strengthening clients and their families, building stronger communities, and ensuring access to opportunities while maintaining a focus on race, equity, and inclusion. As a result of the series, five navigation groups were created to move the work forward. The navigation groups meet regularly and focus on enhancing the following areas: 1) Case Planning, 2) Community Partnerships, 3) Incentives and Interventions, 4) Diversity, Equity and Inclusion, and 5) Operations.

Probation Areas of Transformation

Over the past few years, the juvenile justice system has been working towards a significant transformation as operations align to national best practices. Each of these efforts works to ensure the highest quality of care and services for youth, families, and staff. In the work with youth and their families, Probation is following national juvenile models of success by building a juvenile justice system on a rehabilitative, therapeutic platform. In collaboration with system partners, a review of juvenile policies, procedures, programs and services to ensure they align with national evidence-based practices and are effective in supporting justice involved youth and families.

YDCSS is responsible for the development and support of youth during a critical time in their lives and recognizes they have unique needs. Probation recognizes that to become a trauma-informed department and to continue to foster equity and inclusion, it is imperative that staff attend ongoing training. Staff attended the Positive Youth Development training series which was administered by San Diego State University's Academy for Professional Excellence. This four-part training package included classes on Adolescent Brain Development, Trauma-Informed Care, Implicit Bias, and Restorative Practices. These trainings provide the insight and tools to help officers better connect with youth and better support their successful completion of their case plan goals. Additionally, in an effort to enhance skills and continue to improve the manner in which we work with youth and families, officers attended Redefining My Role in the Juvenile Justice System: Using Culturally Responsive Practice to address Racial and Ethnic Disparities which aims to assist officers in navigating through various activities related to using culturally responsive practices to address racial and ethnic disparities in the Juvenile Justice system. Officers also attended, Teaming with Youth and Families in the Justice System, which assists officers to identify effective strength-based interviewing strategies to engage the youth and family. Explain how trauma has impacted the youth and construct strategies to mitigate the impact of Adverse Childhood Experiences (ACEs) and strengthen Positive Childhood Experiences. Finally, officers attended a Motivational

Interviewing (MI) training to build upon past MI trainings. Officers reviewed the four guiding principles of MI and Stages of Change. They practiced using MI skills such as empathy, active listening, developing change talk, open-ended questions, affirmations, reflections, and summaries. Finally, rolling with resistance was reviewed in order to avoid power struggles. Participants developed strategies for meeting clients where they are at as it relates to their readiness for change.

Additionally, in an effort to build a more supportive relationship between staff and youth, all juvenile staff began to address youth by their given first name or more formally by their last name such as Mr. or Miss. Research and national best practices have demonstrated that positive, supportive communication leads to stronger, more constructive relationships between staff and youth. This change in practice will help to create a more home-like environment in our facilities and research supports that it leads to a reduction in violence.

Disposition Matrix

A Probation-led matrix committee collected and reviewed risk and disposition data, for San Diego justice-involved youth, to inform the development of the Disposition Matrix. The team reviewed the youth's risk level, offense type, and service placements to determine which services and placements were historically most effective. The matrix was presented to stakeholders for input and approved for implementation.

The Disposition Matrix is an evidence based decision-making tool utilized at disposition, for a new offense, to assist Youth Development and Community Support Services' (YDCSS) probation officers with matching youth to the optimal level of supervision and interventions. The disposition recommendation is based on the youth's assessed risk level (as determined by the San Diego Risk and Resiliency Checkup-II) and the most serious presenting offense or true finding. Recommendations are based on the risk-needs-responsivity (RNR) framework.

Research indicates optimal recommendations reduce recidivism while providing the least restrictive option within the suggested range of the matrix cell. The efficacy of the matrix is maximized when youth can be provided with high quality services that meet their needs within the optimal range. Some of the advantages of using the matrix include:

- a. Resources are focused on the youth who need them most.
- b. Reduction in the use of overly intensive intervention for lower risk youth – a practice which has shown to increase recidivism and thereby jeopardizes public safety.
- c. Promotes equity and fairness by ensuring youth with similar offenses and risk levels will receive a similar disposition recommendation.

Collaborative Case Planning and Client Action Plan (CAP)

The new Individualized case plan, Client Action Plan, aligns efforts with evidence-based practices for collaborative case planning with youth involved in the juvenile justice system. The CAP standards embrace positive youth development, family support structures, and restorative justice practices. CAP case plans include goals that are individualized, client-driven and aimed at intervening with the most significant primary needs (formerly known as criminogenic needs). Using the San Diego Risk and Resiliency (SDRRC)-II, officers determine the youth's most significant needs with the overarching goal of reducing recidivisms. When engaging the youth and family, officers include the available support system including family members, friends, mentors, faith-based advisers, school members, service providers, and other pro-social community members. Each team member attending the case planning session is an

integral part of the process, as such each member will work toward helping youth achieve their goals and tasks.

The CAP helps provide a positive pathway for youth on probation to address the needs and risks that are likely impeding their success in the community and assist them in developing new patterns for success throughout their adolescence.

Indian Child Welfare Act (ICWA) Enhancements

Enhanced ICWA mandates by formalizing policies and procedures to meet federal mandates. All staff received training on the purpose of ICWA, inquiry, documentation, federally and non-federally recognized tribes, partnering with tribes, Spirit of ICWA and data collection. This update supports our department in being inclusive, culturally responsive, and sensitive to Tribal cultures, histories, and teaching. These enhancements not only ensure we are compliant with all federal requirements, they also invite a partnership with the youth's tribe and promote required and appropriate tribal and cultural connections during Court proceedings and the case planning process.

Youth Transition Campus (YTC)

In August of 2018, the Board of Supervisors approved funding for the construction of the Probation Department's Youth Transition Campus- Phase 1. The Youth Transition Campus-Phase 1 includes a 96-bed co-ed juvenile facility designed to house post-adjudicated youth. This includes youth who are committed to the Urban Camp or HOPE program (formerly known as the Youthful Offender Unit).

The YTC campus is intentionally designed to feel like a college campus, with an outdoor setting and green landscaping. The campus consists of eight housing units which include 12 single bedrooms. The campus features a schoolyard encompassing the classrooms, gymnasium, and an amphitheater. In addition, the campus includes a support services area, Visiting Center, Youth Dining Hall, Staff Dining Hall, and Kitchen.

The County of San Diego partnered with juvenile justice experts from the Center for Juvenile Justice Reform and Council of Juvenile Administrators to develop a plan to transform juvenile justice in San Diego County. In addition, YTC has utilized the fundamental foundation of the Youth In Custody Practice Model, focusing on intensive treatment and a holistic approach to addressing youth's mental, physical, emotional, and educational needs.

In November of 2021, the Board of Supervisors approved funding for the construction of the Probation Department's Youth Transition Campus- Phase 2. Phase 2 of the project will consist of the reconstruction of Kearny Mesa Juvenile Detention Facility (KMJDF); the campus is designed to house pre-adjudicated youth. Phase 2 will include a 72-bed co-ed juvenile detention campus and will house youth detained pending their disposition. The facility will also encompass a college campus and will have a designated schoolyard. Furthermore, Phase 2 will also construct a new Juvenile Probation Center with approximately 65 offices.

Youths housed in both Phases 1 and 2 will have access to a state-of-the-art medical facility. The medical facility is equipped with medical exam rooms, a medical office, and a separate locked pharmacy. The clinic will also have a dental, eye, and X-ray room for youth when necessary.

In support of the YTC's staff's wellness, a Wellness Room is located on the administration floor and is furnished with fitness equipment, exercise machines, and lockers with showers. Staff are also provided with a designated staff dining area.

CARE Team

The CARE Team, in institutions, offers a means to respond immediately to any developing situation and to provide a therapeutic and team approach to dealing with the youth and the needs at hand. The CARE Team's primary focus is to de-escalate a situation, attempt to resolve the youth's issue and/or primary stressor without the need for the use of force or room confinement.

Healing Opportunities for Personal Empowerment (HOPE)

A newly developed intensive custodial intervention program for youth that replaced the program previously known as the Youthful Offender Program (YOU). This innovative program supports a therapeutic model in which BHS Juvenile Forensics Services Stabilization, Treatment, Assessment, and Transition (STAT-HOPE) clinicians work side-by-side with Probation staff in the units to create a therapeutic milieu that is both strengths-based and trauma-informed. This will allow youth to practice newly acquired skills in a safe environment, while also maintaining structure and personal accountability.

Youth will be actively engaged in positive aspects of their home community to decrease recidivism and further improve long-term outcomes by helping youth to more quickly exit probation and thrive in the community. The HOPE program will actively work to foster engagement with the larger San Diego community. To accomplish this, family members, other positive allies of the youth, and community-based organizations will be an integral part of the in-custody treatment program. As a youth progresses through their therapeutic program, they will have the opportunity to utilize furlough leave, so they can engage in prosocial community activities involving family, education, vocational training, and recreational activities. This will allow the youth to have progressively increasing responsibilities, while slowly decreasing the supervision required.

Once the youth has successfully completed their treatment and in-custody time, a warm hand-off will occur with the community supervision component to continue to receive services from a contracted service provider to ensure success once returning home.

5. Five-Year SIP Chart

5 – Year SIP Chart

Child Welfare Services

Priority Outcome Measure or Systemic Factor: Permanency in 12 months for children entering foster care

National Standard: >35.2%

CSA Baseline Performance: 31.1% (Q2 21)

Current Performance: 26.7% (243/910) (Q3 22)

Target Improvement Goal: >35.2%

Year 1 & 2: Increase permanency to 32%

Year 3: Increase permanency to 33.5%

Year 4: Increase permanency to 35.2%

Priority Outcome Measure or Systemic Factor: Service Array and Resource Development

National Standard: N/A

CSA Baseline Performance: Stakeholders participating in the County Self-Assessment activities reflected that there is a wide variety of services in the county, however, waitlists are a concern as well as knowledge of what is available and access to services. The community reflected that an increase in services utilizing trauma-informed and harm reduction strategies is needed. (Q2 21)

Current Performance: Same as CSA (Q3 22)

Target Improvement Goal: Increase prevention services availability and accessibility.

Year 1 & 2: Identify baseline of number of families on waitlists for prevention services as well as baseline for Child Welfare Referral statistics such as number of referrals received at the Child Abuse Hotline, number of referrals accepted for investigation, and entry to foster care rates.

Year 3: Decrease number of families on waitlists by 5%
Year 4: Implement the New Services; Reduce number of initial occurrence of maltreatment, Reduce waitlist for services

Strategy 1: Implement Reunification Rescuers and increase use of therapeutic interventions to improve parent-child interactions

- ☐ CAPIT
☐ CBCAP
☐ PSSF
☒ N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):
Permanency in 12 months for children entering foster care (P1)

Action Steps:

Implementation Date:

Person Responsible:

Completion Date:

A. Review transportation contracts and services quarterly to identify solutions in order to reduce waitlists.

October 2022

March 2024 and ongoing

Policy and Program Support Policy Analyst

B. Evident Change to collaborate with CWS to establish a shared understanding of the program theory of change and logic model for Reunification Rescuers meetings.

January 2023

July 2023

Evident Change and Continuous Quality Improvement Unit Protective Services Supervisor

C. Expand use of Parent-Child Interaction Therapy (PCIT) through increased funding.

January 2023

January 2024 and Ongoing

Policy and Program Support Policy Analyst

D. Use Child and Family Services Reviews to analyze and identify trends in use of parent-child conjoint therapy to inform recommendations

January 2023

January 2024 and Ongoing

Continuous Quality Improvement Unit

E. The Continuous Quality Improvement Unit will monitor through:

- Reviewing performance quarterly in Items 8 (Visitation with Parents sub-items) and 11 (Relationship of Child in Care with Parents) of the Child and Family Services Reviews (CFSRs).
- Quality Case Reviews for CFSRs on visitation plans documented in the case plan, and/or case file.

January 2023

January 2024 and Ongoing

Continuous Quality Improvement Unit

<ul style="list-style-type: none"> • Monitor number of referrals to PCIT and number of parents served or Monitor waitlists • Use Child and Family Services Reviews to identify trends causing waitlists for transportation services to and from visits 				
F. Training around purpose and procedures related to Reunification Rescuers	August 2023	October 2023 and Ongoing as CQI process informs	Continuous Quality Improvement Unit	
G. Implement Reunification Rescuers meetings to map progress in visitation, problem solve any barriers to visitation and discuss additional services and strategies to improve parent-child interactions	October 2023	May 2024 and ongoing	Continuous Quality Improvement Policy Analysts	
H. Evident Change to complete a process evaluation of the Reunification Rescuers meeting	May 2024	December 2024	Evident Change and Continuous Quality Improvement Unit Protective Services Supervisor	
I. Evaluate efficacy of Reunification Rescuers by completing an outcome evaluation	December 2024	December 2026	Evident Change and Continuous Quality Improvement Unit Protective Services Supervisor	
J. Based on case review analysis, collaborate with clinical and contracts team to support recommendations regarding conjoint therapy	January 2024	January 2025 and Ongoing	Continuous Quality Improvement Unit	

<p>Strategy 2: Incorporate SDM and CANS into CFTs as well as use SOP to strengthen social work engagement practice</p>		<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input checked="" type="checkbox"/> PSSF <input type="checkbox"/> N/A	<p>Applicable Outcome Measure(s) and/or Systemic Factor(s): Permanency in 12 months for children entering foster care (P1)</p>	
<p>Action Steps:</p>		<p>Implementation Date:</p>	<p>Completion Date:</p>	<p>Person Responsible:</p>
A.	<p>Provide training at least once yearly through CFSR Feedback Presentations on importance of in-person contacts with clients on engagement and best-case practice</p>	<p>October 2022</p>	<p>October 2023 and Ongoing</p>	<p>Continuous Quality Improvement Unit Protective Services Supervisor</p>
B.	<p>Work with training academy to identify training curriculum to support:</p> <ul style="list-style-type: none"> Engagement with families Rapport and relationship building with children Quality case notes documentation 	<p>January 2023</p>	<p>June 2024</p>	<p>Policy and Program Support Policy Analyst</p>
C.	<p>Complete research and identify ways the Structured Decision Making (SDM) Reunification Reassessment tool can be used to engage parents in case planning and make recommendations</p>	<p>January 2023</p>	<p>January 2024</p>	<p>Evident Change and Continuous Quality Improvement Protective Services Supervisor</p>
D.	<p>Evaluate effectiveness of Child and Family Team (CFT) meetings to identify what is working well and areas for improvement in engagement</p>	<p>January 2023</p>	<p>March 2025</p>	<p>Policy and Program Support Policy Analyst</p>
E.	<p>The Continuous Quality Improvement Unit will monitor through:</p> <ul style="list-style-type: none"> Monitor coaching and training hours through report from training academy Reviewing performance quarterly in Items 13 (Child and Family Involvement in Case Planning), 14 (Caseworker 	<p>January 2023</p>	<p>January 2024 and Ongoing</p>	<p>Continuous Quality Improvement Unit Protective Services Supervisor</p>

- Visits with Child), and 15 (Caseworker Visits with Parents) of the Child and Family Services Reviews (CFSRs)
- Monitor social worker monthly in-person contacts with mother and father on active Family Reunification cases in the Key Data Report (KDR).
 - Monitor use of the SDM Reunification Reassessment tool through reports from Evident Change.
 - Evaluation of CFT meetings will include interviews and focus groups with stakeholders and surveys

F. Increase utilization of Safety Organized Practice (SOP) coaching and training offered through the training academy	March 2023	March 2024 and ongoing	Policy and Program Support Policy Analyst
G. Review policy on SDM Reunification Reassessment tool and revise to support recommendations	January 2024	June 2024	Evident Change and Policy and Program Support Policy Analyst
H. Revise SDM Reunification Reassessment tool guidance in policy to support recommendations	June 2024	December 2024	Policy and Program Support Policy Analyst
I. Provide training and coaching on use of the SDM Reunification Reassessment tool and integrating SOP for engagement with parents	June 2024	June 2025	Evident Change and Policy and Program Support Policy Analyst

Strategy 1: Increase prevention services

- ☒ CAPIT
☒ CBCAP
☐ PSSF
☐ N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):
Service Array and Resource Development Systemic Factor

Action Steps:

Implementation Date:

Completion Date: Person Responsible:

A. Work with ICF International to develop a child and family well-being department to integrate and streamline child and family serving systems, such as First 5 San Diego, home visitation programs, child abuse prevention efforts, and child-care

September 2022

July 2023

ICF International and Policy and Program Support Policy Analyst

B. Plan and Implement Prevention Hub:

- Procure contract for Prevention Hub by issuing Request for Proposal (RFP)
- Secure contract for Prevention Hub
- Develop policies and procedures for the Prevention Hub
- Training for Prevention Hub Child Welfare Services staff
- Training for Prevention Hub contractor staff
- Establish Key Performance Indicators to measure performance
- Create plan for Media Communications to promote the Prevention Hub

January 2023

October 2023

ICF International and Policy and Program Support Policy Analyst

C. Increasing availability and access of mental health, substance use, parenting education and kinship navigation services through Family First Prevention Services Act and the Prevention Hub

October 2023

March 2024 and Ongoing

Policy and Program Support Policy Analyst

<p>D. Implement Community Response Guide (CRG) to increase access and connection to prevention services timely by:</p> <ul style="list-style-type: none"> • Partnering with Evident Change to facilitate community partner meetings • Researching other jurisdiction's guides • Structuring the guide with community input • Publishing guide 	November 2023	July 2025	Evident Change and Policy and Program Support Policy Analyst
<p>E. Continuous Quality Improvement Tracking to include:</p> <ul style="list-style-type: none"> • Using Key Performance Indicators, once developed, to measure performance of Prevention Hub • Monitor wait lists to ensure decrease in wait times for access services • Monitor Child Welfare Referral statistics to measure change over time • Monitor recurrence of maltreatment rates • Monitor foster care entry rates to measure change over time • Monitor foster care re-entry rates to measure change over time • Monitor number of children requiring residential treatment 	January 2024	January 2025 and Ongoing	Policy and Program Support Policy Analyst

Probation

Priority Outcome Measure or Systemic Factor: Permanency in 12 months for children entering foster care

National Standard: >35.2%

CSA Baseline Performance: 40% (Q2 21)

Current Performance: 50/0% (25/50) (Q3 22)

Target Improvement Goal: >45%

Year 1 & 2: 42%

Year 3: 43%

Year 4: 44%

Priority Outcome Measure or Systemic Factor: Service Array

National Standard: N/A

CSA Baseline Performance: Stakeholders participating in the County Self-Assessment activities reflected that there is a wide variety of services in the county, however, waitlists are a concern as well as knowledge of what is available and access to services. The community reflected that an increase in services utilizing trauma-informed and harm reduction strategies is needed.

Target Improvement Goal: N/A

Year 1 & 2: *Identify average waitlist to Substance Abuse & Mental Health Services to include wraparound services.*

Year 3: *Work with providers to decrease average wait time to services by 5%.*

Year 4: *Implement New Services as needed.*

Strategy 1: Implement Readiness Assessment Tool to ensure appropriate and timely services to increase permanency and reduce re-entry.

- ☐ CAPIT Applicable Outcome Measure(s) and/or Systemic Factor(s): Permanency in 12 months for children entering foster care
☐ CBCAP
☐ PSSF
☒ N/A

Action Steps:		Implementation Date:	Completion Date:	Person Responsible:
A. Research existing Readiness Assessment		July 2023	October 2023	Placement Division Chief Special Projects Placement Unit
B. Develop a Readiness Assessment Tool		January 2024	April 2024	Placement Division Chief Special Projects Placement Unit
C. Develop Policies and Procedures		July 2024	October 2024	Placement Division Chief Special Projects Placement Unit
D. Train Officers in the use of the Readiness Assessment Tool		October 2024	December 2024	Special Projects Staff Development
E. Implement Readiness Assessment Tool		January 2025	Ongoing	Placement Division Chief Special Projects Placement Unit
E. CQI Tracking via the SPO audit tool that is designed to track compliance with state and federal regulations and internal policies and procedures. There will be a bi-annual evaluation that will identify trends and areas that need improvement in order to provide additional training and direction to officers		January 2024	January 2025 and ongoing	Placement Division Chief Placement Supervisors Special Projects Placement Unit

Strategy 2: Partner with community based organizations to ensure substance abuse and mental health services in the community are accessible, trauma informed, and culturally responsive to meet the needs of probation youth to ensure timely permanency

☐ CAPIT
☐ CBCAP
☐ PSSF
☒ N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):
Service Array

Action Steps:

Implementation Date: Completion Date: Person Responsible:

A. Develop and implement Service Array committee

July 2023 December 2023 YDCSS Deputy Chief Probation Officer
Placement Division Chief
Special Projects Placement Unit

B. Analyze and review current services

January 2024 July 2024 Placement Division Chief
Special Projects Placement Unit

C. Aligning with AB2083 initiatives in that services are to be culturally responsive, trauma informed and accessible

January 2024 July 2024 YDCSS Deputy Chief Probation Officer
Placement Division Chief
Special Projects Placement Unit

D. CQI Tracking via the Community Resource Directory (CRD). The CRD tracks the number of referrals, wait times, program acceptance and completion. Additionally, the CRD tracks the number of youth receiving services at any given time

December 2024
and ongoing

December 2024
and ongoing Placement Division Chief
Placement Supervisors
Special Projects Placement Unit

6. Service Provision for CAPIT/CBCAP/PSSF Programs

Expenditure Workbook

(1) DATE SUBMITTED		(2) DATES FOR THIS WORKBOOK		thru		(3) DATE APPROVED BY OCAP	
(4) COUNTY San Diego		(5) PERIOD OF SIP		thru		(6) YEARS 2022-2027	
(7) ALLOCATION (Use the Interim Fiscal or All County Information Notice for Allocation)				CAPIT: \$ 191,285		CBCAP: \$802,513	
				PSSF: \$2,118,541			

No	Program Name	Applies to CBCAP Programs Only	Name of Service Provider	Service Provider is Unknown, Date Revised Workbook to be Submitted to OCAP	CAPIT		CBCAP		PSSF						OTHER SOURCES	NAME OF OTHER	TOTAL
					Dollar amount to be spent on CAPIT Programs	CAPIT is used for Administration Dollar amount to be spent on CBCAP Programs	CBCAP is used for Administration Dollar amount to be spent on CBCAP Programs	Dollar amount to be spent on Family Preservation	Dollar amount to be spent on Family Support	Dollar amount to be spent on Family Reunification	Dollar amount to be spent on Adoption Promotion & Support	Dollar amount to be spent on Adoption Promotion & Support	Dollar amount to be spent on Adoption Promotion & Support	Dollar amount to be spent on Adoption Promotion & Support	Dollar amount to be spent on Adoption Promotion & Support	Dollar amount to be spent on Adoption Promotion & Support	Dollar amount to be spent on Adoption Promotion & Support
A	B	C	D1	D2	E1	E2	F1	F2	G1	G2	G3	G4	G5	G6	H1	H2	I
1	Peer Support- Parent Partners		South Bay Community Services, Home Start, North County Lifeline		\$0	\$0	\$54,910	\$54,910	\$109,820	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$54,910
2	Case Management- STEP In Home	Direct Service	South Bay Community Services, Home Start, North County Lifeline		\$88,293	\$0	\$19,554	\$0	\$17,699	\$17,699	\$75,399	\$0	\$0	\$0	\$0	\$0	\$130,797
3	Case Management- SafeCare	Direct Service	South Bay Community Services, Home Start, North County Lifeline		\$455,382	\$0	\$100,850	\$0	\$194,439	\$194,439	\$188,877	\$0	\$0	\$0	\$0	\$0	\$1,333,937
4	Parent Education- STEP Group Parenting	Direct Service	South Bay Community Services, Home Start, North County Lifeline		\$258,810	\$0	\$70,882	\$0	\$136,060	\$136,060	\$273,321	\$0	\$0	\$0	\$0	\$0	\$668,241
5	Concrete Supports-Adoptees Support		San Diego Youth Services		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$423,708	\$423,708	\$0	\$0	\$423,708
6					\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
7					\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
8					\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
9					\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
10					\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
11					\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
12					\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
13					\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
14					\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
15					\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Totals					\$802,513	\$191,286	\$423,708	\$423,708	\$847,417	\$847,417	\$423,708	\$423,708	\$2,118,541	\$2,118,541	\$0	\$0	\$3,112,340
							20%	20%	40%	20%	100%						

[illegible]

Systematic Training for Effective Parenting (STEP) In Home Parenting and Case Management

- North County Lifeline, Inc.
- Social Advocates for Youth, Inc.
- South Bay Community Services, Inc.
- Home Start, Inc.

STEP In Home Parenting is a County approved curriculum used for families active to child welfare or for prevention. There are different skills for different ages of children, therefore the course is split into age groups. Classes are provided for three separate age groups, parents of children 0-5, parents of school-aged children 6-12, and parents of teens 13-17. The referring party can choose the class best suited to the family through the referral form.

STEP helps parents:

- Learn effective ways to relate to their children by using parent education study groups.
- Identify the purposes of children's behavior and learn how to encourage cooperative behavior and not reinforce unacceptable behaviors.
- Change dysfunctional and destructive relationships with their children by offering concrete alternatives to abusive and ineffective methods of discipline and control.

Case Management

Families referred to STEP In home are assigned to a Family Support Partner (FSP).

FSPs will automatically:

- Assist in establishing health insurance for eligible children
- Assist in bringing child immunizations up to date
- Assist in establishing a medical provider for the family
- Provide information and training on the importance of appropriate nutrition and the dangers of childhood obesity
- Provide information and assistance to determine eligibility for CalFresh
- Help the family to understand and navigate the CWS and other public systems

Funding Sources

CWS acknowledges the requirement that CBCAP is for non-CWS clients, also known as prevention. Since the program funding is blended, we have the contractors report the numbers of Dependency, Voluntary and Non-CWS/Prevention clients to be sure the percentage of CBCAP funding is used only for Non-CWS/Prevention clients.

Source	List of Funded Activities
CAPIT	In-Home Parent Education
CBCAP	
PSSF Family Preservation	
PSSF Family Support	
PSSF Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s): (Specify)	

Identify Priority Need Outlined in CSA Report (Refer to pages 119-125)

- Support services to strengthen families and nurture the development of healthy behaviors.
- Access to prevention services

Target Population

- Vulnerable families with children that are at risk of abuse or neglect
- Families that have an open child welfare case

Target Geographic Area

- Countywide

Timeline

- These contracts are effective March 01, 2022 through April 28, 2027.

Evaluation

Program Outcome(s) and Measurement & Quality Assurance (QA) Monitoring

Desired Outcome	Indicator	Source of Measure	Frequency
Increase parental knowledge	60% of participants in the STEP program will increase parental knowledge	Protective Factors Survey	At the ending of services, reported annually

Client Satisfaction⁸

Method or Tool	Frequency	Utilization	Action
Satisfaction Survey	Completed by participants at end of training classes	Reviewed after each session	Problem areas addressed by staff, as appropriate to resolve issues and ensure continuous quality improvement

Systematic Training for Effective Parenting (STEP) Group Parent Training

Service Provider

- North County Lifeline, Inc.
- Social Advocates for Youth, Inc.
- South Bay Community Services, Inc.

- Home Start, Inc.

Program Description

STEP Group Based Parenting Classes- is a County approved curriculum used for families with a child welfare services case plan, voluntary and prevention clients, it utilizes specialized curriculums and training for families with special needs children, adolescents, and other issues defined by the families receiving services. There is no case management or in home visits for STEP Group Parenting. Classes are provided for three separate age groups, parents of children 0-5, parents of school-aged children 6-12, and parents of teens 13-17. Graduates receive a certificate of completion.

STEP helps parents:

- Learn effective ways to relate to their children by using parent education study groups.
- Identify the purposes of children's behavior and learn how to encourage cooperative behavior and not reinforce unacceptable behaviors.
- Change dysfunctional and destructive relationships with their children by offering concrete alternatives to abusive and ineffective methods of discipline and control.

Funding Sources

CWS acknowledges the requirement that CBCAP is for non-CWS clients, also known as prevention. Since the program funding is blended, CWS has the contractors report the number of dependency, voluntary and non-CWS/Preventions clients to be sure the percentage of CBCAP funding is used only for non-CWS/Prevention clients.

Source	List of Funded Activities
CAPIT	Parent Education
CBCAP	
PSSF Family Preservation	
PSSF Family Support	
PSSF Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s):	

Identify Priority Need Outlined in CSA Report (Refer to pages 119-125)

- Support services to strengthen families and nurture the development of healthy behaviors.
- Access to prevention services

Target Population

- Vulnerable families with children that are at risk of abuse or neglect
- Families that have an open child welfare case

Target Geographic Area

- Countywide

Timeline

- These contracts are effective March 01, 2022 through April 28, 2027.

Evaluation

Program Outcome(s) and Measurement & Quality Assurance (QA) Monitoring

Desired Outcome	Indicator	Source of Measure	Frequency
Increase parental knowledge	60% of participants in STEP group parenting will increase parental knowledge	As measured by the Protective Factor Survey	As classes are completed; reported annually

Client Satisfaction

Method or Tool	Frequency	Utilization	Action
Satisfaction Survey	Completed by participants at end of training classes	Reviewed after each session	Problem areas addressed by staff, as appropriate to resolve issues and ensure continuous quality improvement

SafeCare Parenting and Case Management

Service Provider

- North County Lifeline, Inc.
- Social Advocates for Youth, Inc.
- South Bay Community Services, Inc.
- Home Start, Inc.

Program Description:

SafeCare is an evidence-based in-home curriculum for families with children under the age of 5. SafeCare focuses on three key outcomes, creating positive relationships between the caregivers and their children, ensuring homes are safe to reduce the risk of child injury and keeping children as healthy as possible. A Family Support Partner (FSP) helps support and strengthen the families referred. The assigned FSP will review the curriculum during home visits

The modules reviewed are:

- Health
- Home Safety
- Parent and Child Interaction

Case Management

Families referred to STEP In home are assigned to a Family Support Partner (FSP). FSPs will automatically:

- Assist in establishing health insurance for eligible children
- Assist in bringing child immunizations up to date
- Assist in establishing a medical provider for the family
- Provide information and training on the importance of appropriate nutrition and the dangers of childhood obesity
- Provide information and assistance to determine eligibility for CalFresh
- Help the family to understand and navigate the CWS and other public systems

Funding Sources

CWS acknowledges the requirement that CBCAP is for non-CWS clients, also known as prevention. Since the program funding is blended, CWS has the contractors report the number of dependency, voluntary and non-CWS/Preventions clients to be sure the percentage of CBCAP funding is used only for non-CWS/Prevention clients.

Source	List of Funded Activities
CAPIT	In-Home Parent Education
CBCAP	
PSSF Family Preservation	
PSSF Family Support	
PSSF Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s): (Specify)	

Identify Priority Need Outlined in CSA Report (Refer to pages 119-125)

- Support services to strengthen families and nurture the development of healthy behaviors.
- Access to prevention services
- Services for children ages 0-5

Target Population

- Vulnerable families with children that are at risk of abuse or neglect
- Families that have an open child welfare case

Target Geographic Area

- Countywide

Timeline

- These contracts are effective March 01, 2022 through April 28, 2027.

Evaluation

Program Outcome(s) and Measurement & Quality Assurance (QA) Monitoring

Desired Outcome	Indicator	Source of Measure	Frequency
Increase knowledge of parenting and child development	60% of participants in SafeCare will increase in parental knowledge	Protective Factors Survey	At the ending of services, reported annually

Client Satisfaction

Method or Tool	Frequency	Utilization	Action
Satisfaction Survey	Completed by participants at end of training classes	Reviewed after each session	Problem areas addressed by staff, as appropriate to resolve issues and ensure continuous quality improvement

Parent Partner Within the Community Services for Families (CSF) Program

Service Provider

- North County Lifeline, Inc.
- Social Advocates for Youth, Inc.
- South Bay Community Services, Inc.
- Home Start, Inc.

Program Description

Parent Partners (PP) are birth parents who have been involved with CWS and successfully reunified with their children. Because of their journey through CWS and Dependency Court systems, they possess a unique perspective and can provide guidance by sharing their experiences and lessons learned. Parent Partners will provide educational and support services to parents and will encourage early engagement in services needed to meet their CWS Case Plan objectives.

- Non-CWS clients are referred to similar Parent Partner services as needed to prevent the clients from becoming involved in the CWS system when possible
- Provide parents face-to-face review of A Parent's Guide to the Child Welfare System booklet and video to supplement information provided by the CWS Social Worker
- Attend Child and Family Team meetings when requested

Funding Sources

Source	List of Funded Activities
CAPIT	
CBCAP	
PSSF Family Preservation	Peer Support
PSSF Family Support	
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s): (Specify)	

Identify Priority Need Outlined in CSA Report (Refer to pages 119-125)

- Increase the availability of peer led services within community settings
- A community partner that will serve as a liaison
- Engagement with families

Target Population

- Parents or primary caregiver, to facilitate reunification

Target Geographic Area

- Countywide

Timeline

- These contracts are effective March 01, 2022 through April 28, 2027.

Evaluation

Program Outcome(s) and measurement & Quality Assurance (QA) Monitoring

Desired Outcome	Indicator	Source of Measure	Frequency
Increase parental resilience	50% of participants in the Parent Partner program will increase parental resilience	Protective Factors Survey	At the ending of services, reported annually

Client Satisfaction

Method or Tool	Frequency	Utilization	Action
Satisfaction Survey	Completed by participants after PP sessions are completed	Surveys reviewed after final session	Problem areas addressed by staff, as appropriate to resolve issues and ensure continuous quality improvement

Adoption Support Services

Service Provider

- San Diego Youth Services (SDYS)

Program Description

The SDYS Adoption Support Services Program is designed to meet the special needs of families in the process of adopting as well as those whose adoptions have finalized. Services are available throughout San Diego County. For many children and teens, early trauma, layered with the specific issues of adoption, creates a challenge that can impede the bonding and attachment system within adoptive families. For this reason, SDYS provides services and support that focus on the whole child within the adoptive family constellation. Trauma can also negatively impact a child's capacity to learn and grow academically, socially, and emotionally. For this reason, they address the child's needs in the context of the school and peer environment. They are also aware of the tendency for families experiencing stress to

isolate and feel separate from the larger community. All their services aim to target the very specific needs of these families to ensure permanency and healthy family development.

Services include:

- Support groups for parents (English/Spanish), teens, tweens, school age and pre-school (2yrs.-4yrs.)
- Movie night (respite and social skills building events) for all youth
- Saturday enrichment outings for youth
- Family Advocate Coordinator for each family (resources, referrals, parent coaching, school interface, support)
- Clinical services using attachment based and trauma informed models for targeted families (English/Spanish)
- Twice yearly special workshops to enhance the working knowledge of adoption and attachment issues for all attendees. Participants include Adoptions Social Workers and Supervisors, mental health providers, educators, adoptive and foster-adoptive resource parents.
- Mentor/tutor services
- Twice yearly family festivals
- Social skills groups and camps
- Special events
- Respite reimbursement
- Monthly newsletter
- On-going parent coaching by phone and email

Funding Sources

Source	List of Funded Activities
CAPIT	
CBCAP	
PSSF Family Preservation	
PSSF Family Support	
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	Adoption Support Services
OTHER Source(s): (Specify)	

Identify Priority Need Outlined in CSA Report (Refer to pages 119-125)

- Support Services to strengthen families and nurture the development of healthy behaviors
- Services to support youth stability

Target Population

- Families exploring adoption
- Families that have finalized adoption

Target Geographic Area

- Countywide

Timeline

- These contracts are effective January 1, 2021 through December 31, 2025.

Evaluation

Program Outcome(s) and Measurement & Quality Assurance (QA) Monitoring

Desired Outcome	Indicator	Source of Measure	Frequency
Social and emotional skills	50% of children will demonstrate an improvement in their social and emotional skills	Protective Factors Survey	At the ending of services, reported annually

Client Satisfaction

Method or Tool	Frequency	Utilization	Action
Satisfaction Survey	Completed by all participants twice annually, through email and attendance at events	Surveys reviewed after receipt	Problem areas addressed by staff, as appropriate to resolve issues and ensure continuous quality improvement

OCAP recognizes the priority of needs identified during CSA may change during the period of the plan. The county may need to reconsider programs/services/activities funded based on the needs and gaps that arise prior to the next SIP due date. The OCAP designated liaison will contact their assigned OCAP consultant to discuss any potential changes to their current service provision plan. The county liaison should not wait to report these changes during the OCAP annual reporting process. Changes need to be discussed prior to the reporting period.

7. Attachments

Appendix A: Submitted Recommendations of the Foster Alumni & Youth Community Empowerment Subcommittee (FAYCES)

Introduction by CWS and Probation: FAYCES submitted the following recommendations to CWS and Probation in response to the County's engagement sessions that informed the development of the SIP goals, objectives and strategies. The county closely reviewed the recommendations and integrated them into the SIP. Some recommendations were not included because they were not feasible within the SIP timeline, they relate to programs and initiatives that involve other county and community partners, or they require additional consideration and vetting with Juvenile Justice Partners, county counsel and/or child attorneys. CWS and Probation are meeting with FAYCES to review these recommendations and will continue to review these recommendations on a regular basis throughout the SIP's implementation.

SAN DIEGO COUNTY SYSTEM-IMPROVEMENT PLAN (SIP) PROPOSAL FOR RECOMMENDATIONS & IMPLEMENTATION FOSTER ALUMNI & YOUTH COMMUNITY EMPOWERMENT SUBCOMMITTEE (FAYCES)

San Diego County, Child Welfare Services and Juvenile Probation have an extraordinary opportunity to positively impact the lives and futures of our San Diego youth and young adults impacted by Probation and Child Welfare Services, the system. To maximize this opportunity and fulfill our collective commitment to youth-centered solutions in all cases, the most important stakeholders, our current and former foster youth, and justice-involved youth, must be prioritized and be at the core of every decision and implementation strategy of the System Improvement Plan for Probation and Child Welfare Services.

The recommendations presented in this proposal are created by the lived experiences of members of the Foster Alumni and Youth Community Empowerment Subcommittee (FAYCES), who have navigated the system, Child Welfare Services, Probation, and/or Juvenile Justice, and all who have made the transition from the system into adulthood. To create an environment with the highest potential for the greatest positive impact in the lives of all youth impacted by the system, we believe it is imperative that the following, essential recommendations are given full consideration and adopted in some form or fashion within the System Improvement Plan.

PROBATION STRATEGIES

To positively influence the outcomes of youth impacted by Juvenile Justice/Probation, it is imperative that a community approach be established for a shared effort to care for and empower youth impacted by Probation. By establishing a consistent partnership between Juvenile Probation and FAYCES, those with lived experience can serve as active contributors to the solution of 1) improving youth access to services and resources and 2) creating a community approach and shared opportunity to care for our youth that are system impacted, extending support and responsibility beyond Probation Officers. FAYCES is dedicated to this opportunity.

PROBATION STRATEGY 1 – Build effective relationships and individual plans and responses to maximize the opportunity for youth success. (PERSON FOCUS)

FAYCES RECOMMENDATION 1

Connect each youth with a Lived Experience Coach with shared experience of being a system-involved youth. Lived-Experience Coaches role will be to empower and support youth to define their own path to a productive, thriving, and meaningful life, and advocate for youth to have access to appropriate services that will support the youth in their development and healing, creating a community approach to growth and connection, beyond the system.

FAYCES RECOMMENDATION 2

Develop PO training that includes child/adolescent development, strength-based language, & communication skills. These training topics will be grounded in a holistically “human oriented” lens of an abundant mind state while

providing a framework of empowering language to build and grow rather than shrink and diminish the potential of our youth.

FAYCES RECOMMENDATION 3

Within their first week of engaging in Probation, have youth complete aptitude tests that reflect their strengths and interests and discuss their aptitude results with their Lived Experience Coach. Aptitude tests should be incorporated as a youth-centered tool to 1) aid care/service providers in determining resources for youth and 2) provide youth with reflective information about their strengths and interests to guide the development of an individualized success plan while in the custody of Probation. Aptitude tests and results are vital to youths' consciousness and general understanding of self beyond their current circumstances and can inspire a youth with the opportunity to seek out and utilize resources to create a different life outcome.

FAYCES RECOMMENDATION 4

Have youth complete the Adverse Childhood Experiences (ACEs) Quiz within one week of engagement with Probation. The ACEs Quiz offers the opportunity for youth to reflect on their lived experience and serves as a foundational tool to support youth in acknowledging the trauma they have endured in their short lives. Through reflective conversation(s) with their Lived Experience Coach, youth will have the opportunity to normalize trauma as a universal experience and discuss the choices/resources they have to begin to heal. Including the ACEs Quiz allows the youth to become aware of their trauma (in addition to Probation or mental health providers) and invites the youth to be actively aware and involved in their healing process.

FAYCES RECOMMENDATION 5

Recognize mental wellness as a basic need for every youth interfacing with the Juvenile Justice System and offer therapy access to every youth.

PROBATION STRATEGY 2 - Match youth with the most appropriate services to support permanency in a timely manner and reduce re-entry into care (SERVICE FOCUS)

FAYCES RECOMMENDATION 1

Have youth and their Lived Experience Coach work together in developing the youth's Growth Plan that is individualized and strength-based, incorporating youth's aptitude test results, goals, interests, and strengths.

Studies have shown that system-involved youth who are engaged in intentional education programs are less likely to offend and overall reduce recidivism in the juvenile justice system (Zoukis, 2014). By creating Growth Plans probation staff and providers can meet youth where they are at (educationally, socio-emotionally, culturally) while also inviting youth to take ownership of their lives by setting goals and gaining access to opportunities that elevate themselves beyond the crime.

FAYCES RECOMMENDATION 2

Provide a pipeline to services that are inclusive of youth's disabilities, mental health needs, strengths, interests, crime-related experiences, etc. Understanding the youth's needs is the first step to seeing the youth as a human first and the crime-related experience second. It is dually important to consider the youths' interests, strengths, and lived experience as weighted value to apply towards connecting youth to intentional, appropriate, and trauma informed services while being rooted in a culturally responsive approach.

FAYCES RECOMMENDATION 3

Develop a youth incentive/reward for good behavior and progressing in their Growth Plan. Knowing that youth dramatically reduce their recidivism rates by elevating their educational attainment, it is imperative to invest in youth's efforts to connect with their passion (how does one apply their own interests, preferences, and perspectives, and lived experiences to the greater social constructs) and purpose (how does this passion equate to both the greater

social good as well as producing financial incentive for such work). By incentivizing youth to engage in their passion, purpose, and goals for the future (extrinsic motivation), youth begin to develop their own value of investing time, energy, and effort towards themselves (intrinsic motivation).

CHILD WELFARE SERVICES STRATEGY 1 - Increase Prevention Services (EMPOWER)

FAYCES RECOMMENDATION 1

Incorporate strength-based aptitude tests for children and families seeking prevention services. Implement results from aptitude tests within goal setting discussions and action plans.

FAYCES RECOMMENDATION 2

Develop listening and communication training for children, families, caregivers, families, social workers that offers a framework of active listening as a foundational relationship practice.

FAYCES RECOMMENDATION 3

Intentionally collaborate diverse resource providers that are culturally representative of children and families. These providers and organizations should be selected by children and families.

FAYCES RECOMMENDATION 4

Invest in education, career, and training resources that support the advancements of children and parents to have the means to live a sustainable life in San Diego County.

CHILD WELFARE SERVICES STRATEGY 2 - Improve Parent-Child Interactions (SUPPORT)

FAYCES RECOMMENDATION 1

Increase family visitations by providing transportation assistance to reduce transportation as a barrier to children and families spending time together and maintaining an in-person connection.

FAYCES RECOMMENDATION 2

Formalize a partnership (MOU) with community-based organizations to create intentional resources, programming, and communication strategies that encourage and support fathers being engaged in their children's lives. These partnerships will be responsible for tracking and measuring the outcomes and impacts of children and father interactions.

FAYCES RECOMMENDATION 3

Offer neutral, third-party opportunities for children and their families to heal and communicate through therapy that is culturally and demographically appropriate. These opportunities will allow families to be vulnerable and feel confident working through past traumas.

CHILD WELFARE SERVICES STRATEGY 3 - Strengthen Social Work Engagement Practices (SUPPORTIVE CULTURE)

FAYCES RECOMMENDATION 1

Implement paid, lived experience coaches to lead rapport building with youth, influence youth-social worker interaction and communication, and support youth in formal meetings including (Child-Family Team meetings, meetings with social workers, and court hearings).

FAYCES RECOMMENDATION 2

Change standards/culture of case file documentation to include trauma informed, strength-based language, tangible recommendations for children and families and use as a storytelling tool for a child will see these documents in the future. Develop and implement new standards for case file documentation that demonstrates strength-based language and is trauma informed. Notes and recommendations made by social workers should be clearly written and accessible for children and families to understand and work towards.

FAYCES RECOMMENDATION 3

Implement a digital communication platform that is shared between youth, parents, social workers, and caregivers that includes case file notes, meeting dates, and important documents.

FAYCES RECOMMENDATION 4

Develop cultural competency for rapport building between youth and social workers that promotes connection and active listening (i.e. meals, social activity, not notetaking).

CHILD WELFARE SERVICES STRATEGY 4 - Implement Prevention Hub (SPECIFIC)

FAYCES RECOMMENDATION 1

Hub operating hours are beyond the traditional 9a-5p business hours. By having early morning, evening, and weekend hours of operations, families and children will be able to access services and support during critical times.

FAYCES RECOMMENDATION 2

Hub operated by community-based organizations. By having staff from the community serve as the greeters/directional staff to guide families in locating resources, the Hub reflects a community approach to supporting families and children. The integration of Child Welfare Services staff will influence the culture of CWS being seen as a supportive resource.

FAYCES RECOMMENDATION 3

The Hub should be a place of empowerment and solutions. The Hub needs to be a place where support and resources are available real-time, not another office for long waits, applications, and limited staff. Providing real-time crisis intervention and counseling services is a critical element to support children and families in immediate need.

FAYCES RECOMMENDATION 4

Include private rooms for children and families to have confidential conversations with community organizations and services.

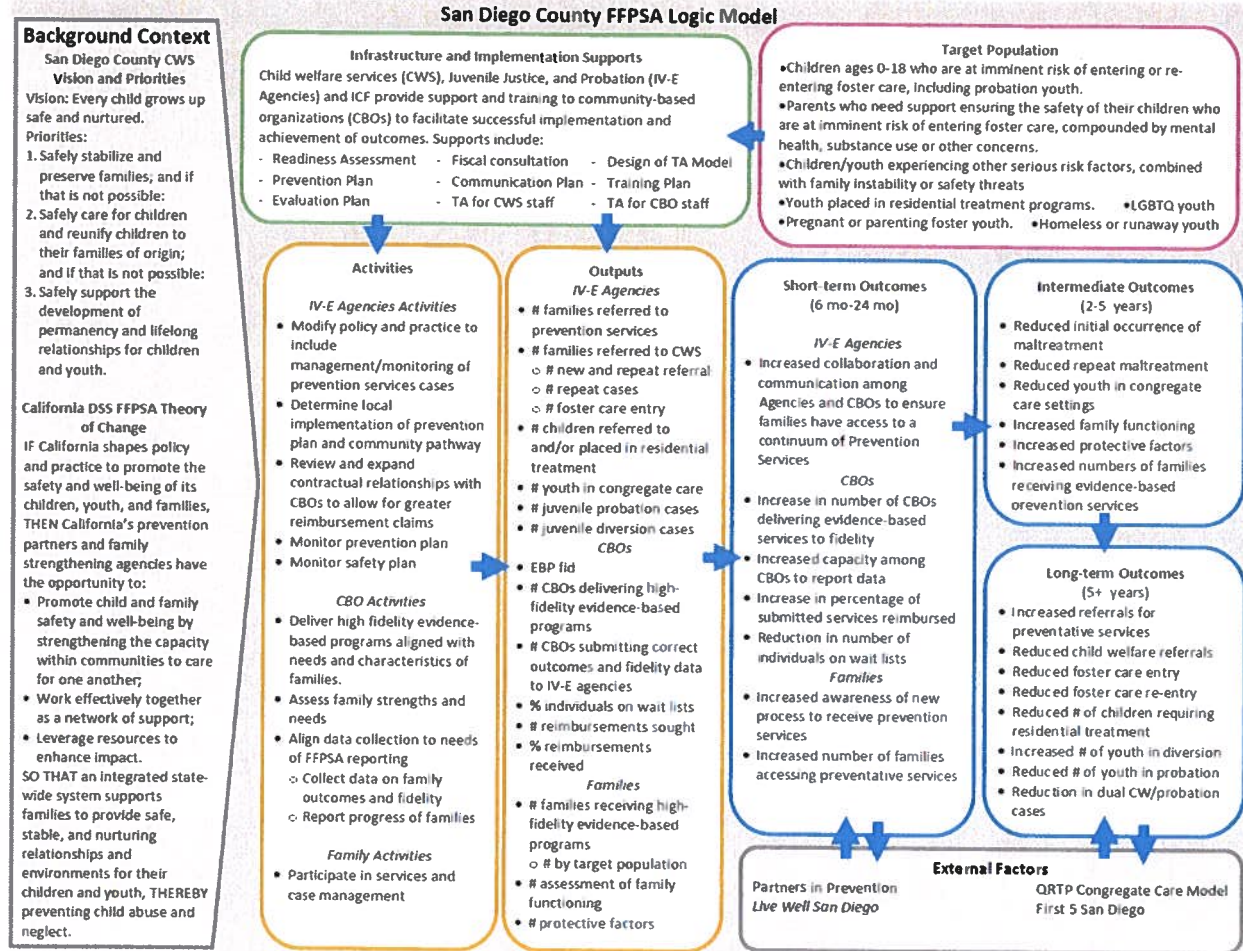
FAYCES RECOMMENDATION 5

Provides onsite childcare for families utilizing resources to give parents and caregivers the opportunity to seek individualized resources and/or complete the required process of applying to services without the added duty of watching their child/children.

CONCLUSION

We have an extraordinary opportunity to positively impact the lives and futures of our San Diego youth and young adults that are system-involved. The recommendations above are driven by the lived experiences of FAYCES members, who possess the critical lived experience, insights and collaborative mindset needed to advance Child Welfare Services, Juvenile Justice, and Probation and are committed to improving policy and practices to be youth-centered.

Appendix B: San Diego FFPSA Logic Model



Appendix C: Overview of FFPSA for Community

Family First Prevention Services Act Overview

Moving Toward a Comprehensive Prevention System

The Family First Prevention Services Act (FFPSA) was signed into law on February 9, 2018. The FFPSA changed the landscape of Social Security Act Title IV-E funding distribution, which historically funded child welfare services and juvenile probation for placement of youth in care for families who met the Aid to Families with Dependent Children income criteria.

The goal of FFPSA Part I is to strengthen families by:

- ◆ Ensuring a prevention-focused infrastructure to keep children safely at home using evidence-based practices
- ◆ Eliminating income criteria, creating opportunities to provide prevention services to more families
- ◆ Providing funding to prevent the entry or return of youth into the foster care or probation systems

The revised FFPSA funding distribution now allows jurisdictions to provide more services to families in need. Eligible services include those focused on substance use disorders, mental health, in-home parenting, and kinship navigation. Services can be provided for up to 12 months with the potential to extend based on the family's needs. Children, youth, parents and both relative and non-related extended family members who have guardianship or custody of the children are all eligible. Medi-Cal recipients will continue accessing services primarily through their insurance provider and Behavioral Health Services, with FFPSA funding supplementing after primary resources are used.

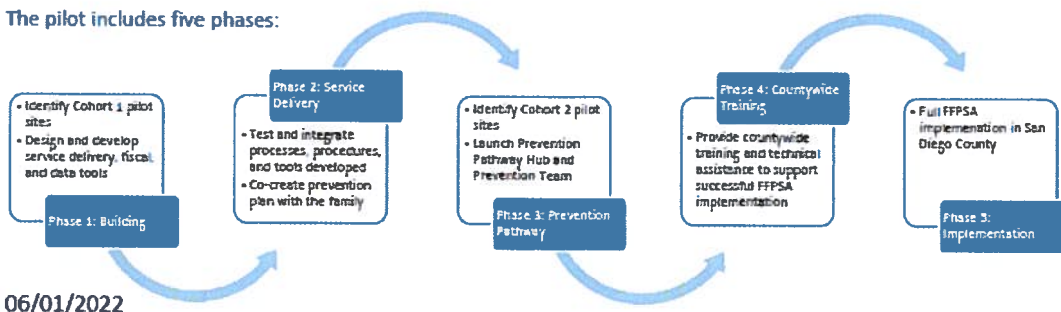
FFPSA in the County of San Diego

FFPSA was launched in the County of San Diego through a collaboration of Child Welfare Services, Juvenile Probation and Behavioral Health Services. It also includes representation from the community including the following partners: various community-based organizations, District Attorney's Office, Interagency Leadership Team, Partners in Prevention Network, area tribes, and individuals with lived experience.

The County of San Diego engaged community-based organizations and tribal partners in a readiness assessment to gain a better understanding of the span and depth of services being provided to better serve children, youth and families in the community. Culturally responsive services for children, youth, and families who would benefit from prevention services were also prioritized.

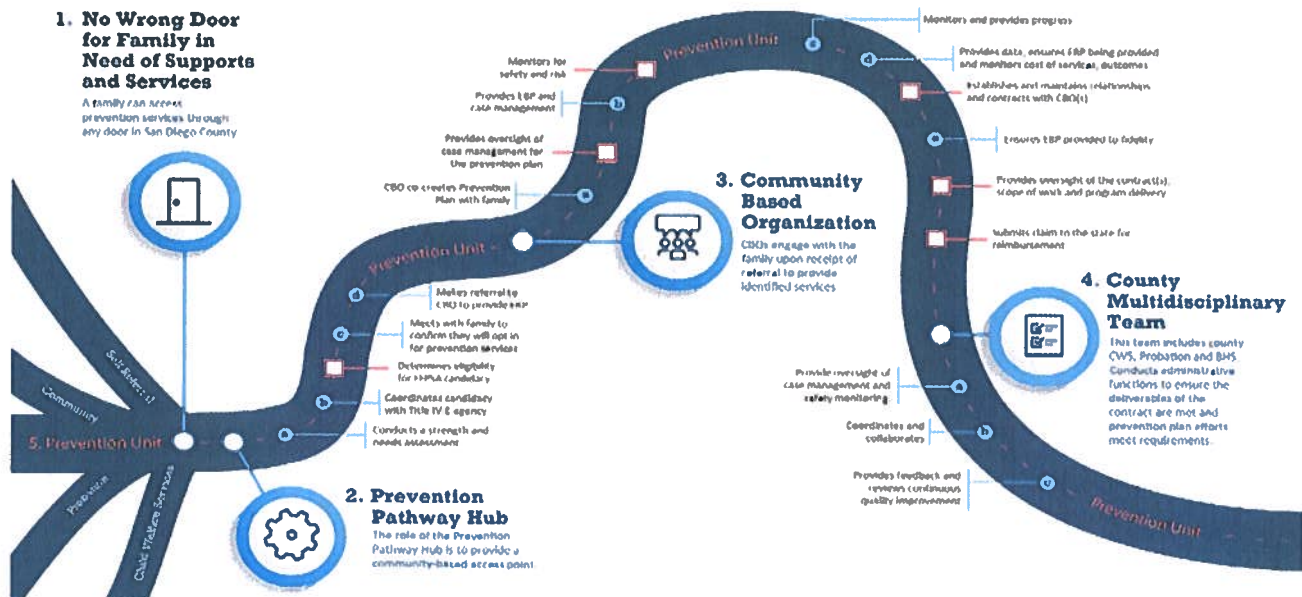
As the program moves forward, the next steps include piloting the service delivery. These were chosen based on the results of the readiness assessment in the following domains: motivation, general capacity and intervention-specific capacity.

The pilot includes five phases:



The County of San Diego has developed the following Prevention Pathway to demonstrate that there is “No Wrong Door” through which services may be accessed. The “No Wrong Door” approach is intended to provide an opportunity for families to access comprehensive prevention services in the county.

Recognizing that FFPSA prevention services may not be a match for all children and families, there will be “off-ramps” that families can use to access other prevention services to best meet their needs.



Evidence-Based Services

California has identified the following evidence-based practices in its plan:

Brief Strategic Family Therapy	Motivational Interviewing
Family Check-up	Multisystemic Therapy
Functional Family Therapy	Nurse Family Partnership
Healthy Families America	Parents as Teachers
Homebuilders	Parent-Child Interaction Therapy

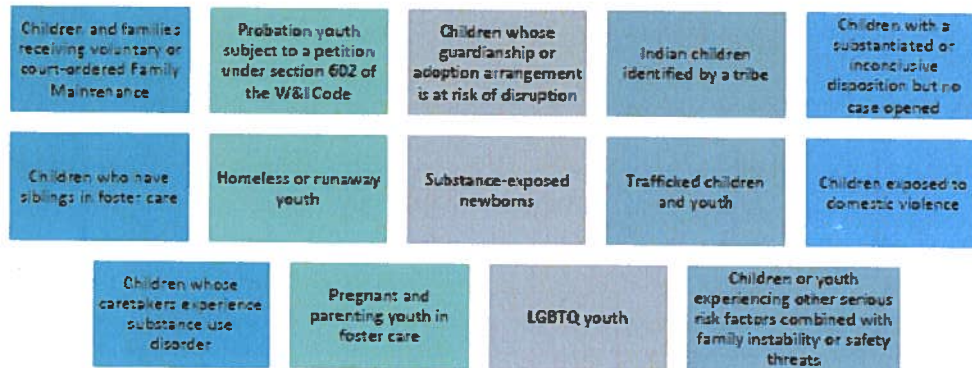
At this time, California’s prevention plan includes only well-supported practices as defined by the [Title IV-E Prevention Services Clearinghouse](https://preventionservices.acf.hhs.gov/) (<https://preventionservices.acf.hhs.gov/>). Advocacy efforts across the state aim to include a broader range of practices and ensure practices are culturally relevant and appropriate to serve the state’s diverse populations.

In the County of San Diego, the provision of evidence-based services such as Functional Family Therapy, Healthy Families America (First Five, First Steps), Motivational Interviewing, and Parent-Child Interaction Therapy will ensure children, youth, and families across diverse backgrounds have more equitable opportunities to effectively overcome barriers to providing safety.

The County of San Diego is taking steps to expand the use of these evidence-based practices from California’s state plan and is working with agencies to add more practices to the Title IV-E Prevention Services Clearinghouse. FFPSA is also part of the larger Comprehensive Prevention Plan for families that will include additional concrete supports and supportive services.

Candidacy Eligibility

Based on the FFPSA's definition of candidacy, California has identified the following population of children as potentially eligible for meeting the "at imminent risk of removal" criteria. A separate strengths and needs assessment will be conducted with the family to determine candidacy for services.



San Diego County Child Welfare Services and the Juvenile Probation Department are the authorizing entities to verify candidacy. A strengths and needs assessment is conducted with the family to evaluate if the child or youth meets the criteria of imminent risk of removal but may be able to remain in the home of the parents or relatives as long as prevention services are put in place.

What Can You Do to Stay Informed?

Be engaged and active in local, state, and federal workgroups to:

- ◆ Research the federal clearinghouse at <https://preventionservices.acf.hhs.gov>
- ◆ Invite the San Diego implementation team to a meeting with your group to learn more
- ◆ Participate in County engagement meetings
- ◆ Discuss any necessary changes to promote a successful and sustainable implementation
- ◆ Provide outcome data on the efficacy of this legislation
- ◆ Share expertise for interventions that could be reviewed and added to the clearinghouse
- ◆ Assist with communicating to families about opportunities to access additional resources and supports

For more information or to address questions,
contact Krystal Glowack at krystal.glowack@sdcounty.ca.gov

